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Harper, Terry D.; Koelkebeck, Lance; Fitz-Gerald, Timothy
Monterey, California: Naval Postgraduate School

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**NAVAL
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THESIS

**BUILDING A CAPABILITIES NETWORK TO
IMPROVE DISASTER PREPARATION EFFORTS IN
THE SOUTHERN COMMAND (SOUTHCOM) AREA
OF RESPONSIBILITY (AOR)**

by

Terry D. Harper
Lance Koelkebeck
Timothy Fitz-Gerald

December 2013

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Bryan Hudgens
Aruna Apte

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REPORT DOCUMENTATION PAGE			Form Approved OMB No. 0704-0188	
Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instruction, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Washington headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188) Washington DC 20503.				
1. AGENCY USE ONLY (Leave blank)		2. REPORT DATE December 2013	3. REPORT TYPE AND DATES COVERED Master's Thesis	
4. TITLE AND SUBTITLE BUILDING A CAPABILITIES NETWORK TO IMPROVE DISASTER PREPARATION EFFORTS IN THE SOUTHERN COMMAND (SOUTHCOM) AREA OF RESPONSIBILITY (AOR)			5. FUNDING NUMBERS	
6. AUTHOR(S) Terry D. Harper, Lance Koelkebeck, and Timothy Fitz-Gerald				
7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES) Naval Postgraduate School Monterey, CA 93943-5000			8. PERFORMING ORGANIZATION REPORT NUMBER	
9. SPONSORING /MONITORING AGENCY NAME(S) AND ADDRESS(ES) N/A			10. SPONSORING/MONITORING AGENCY REPORT NUMBER	
11. SUPPLEMENTARY NOTES The views expressed in this thesis are those of the author and do not reflect the official policy or position of the Department of Defense or the U.S. Government. IRB protocol number ____N/A____.				
12a. DISTRIBUTION / AVAILABILITY STATEMENT Approved for public release; distribution is unlimited			12b. DISTRIBUTION CODE A	
13. ABSTRACT (maximum 200 words) The U.S. Southern Command (SOUTHCOM) area of responsibility (AOR) encompasses 31 countries and 15 areas of special sovereignty, and represents about one-sixth of the landmass of the world assigned to regional unified commands. To provide rapid and effective disaster relief in an area this large, a commander requires identification of available resources and effective coordination with those who can provide these resources. This research analyzes the capabilities of various in-theater non-government organizations and the interactive efforts between them and the U.S. military. This project will provide guidance to decision-makers in the SOUTHCOM AOR to avoid redundancy- in efforts and more effectively distribute essential resources during humanitarian assistance and disaster relief operations.				
14. SUBJECT TERMS: Disaster relief, disaster preparedness, humanitarian assistance, non-government organizations, NGO, capabilities			15. NUMBER OF PAGES 119	
			16. PRICE CODE	
17. SECURITY CLASSIFICATION OF REPORT Unclassified	18. SECURITY CLASSIFICATION OF THIS PAGE Unclassified	19. SECURITY CLASSIFICATION OF ABSTRACT Unclassified	20. LIMITATION OF ABSTRACT UU	

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**BUILDING A CAPABILITIES NETWORK TO IMPROVE DISASTER
PREPARATION EFFORTS IN THE SOUTHERN COMMAND (SOUTHCOM)
AREA OF RESPONSIBILITY (AOR)**

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Submitted in partial fulfillment of the
requirements for the degree of

MASTERS OF BUSINESS ADMINISTRATION

from the

**NAVAL POSTGRADUATE SCHOOL
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ABSTRACT

The U.S. Southern Command (SOUTHCOM) area of responsibility (AOR) encompasses 31 countries and 15 areas of special sovereignty, and represents about one-sixth of the landmass of the world assigned to regional unified commands. To provide rapid and effective disaster relief in an area this large, a commander requires identification of available resources and effective coordination with those who can provide these resources. This research analyzes the capabilities of various in-theater non-government organizations and the interactive efforts between them and the U.S. military. This project will provide guidance to decision-makers in the SOUTHCOM AOR to avoid redundancy- in efforts and more effectively distribute essential resources during humanitarian assistance and disaster relief operations.

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LIST OF ACRONYMS AND ABBREVIATIONS

AFRICOM	Africa Command
AOR	area of responsibility
ART	Americas Relief Team
C.U.R.E.	Commission on Urgent Relief and Equipment
CENTCOM	Central Command
CEPAR	Critical Preparedness and Response
CHOW	Courtland Humanitarian Outreach Worldwide
COCOM	combatant command
CSO	civil society organizations
DoD	Department of Defense
EMT	emergency medical team
EPI	expanded program on immunization
EUCOM	European Command
FAVACA	Florida Association for Volunteer Action in the Caribbean and the Americas
FBO	faith-based organization
HA/DR	Humanitarian Assistance and Disaster Relief
HHI	Heart to Heart International
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome
IDP	internally displaced person
IRD	International Relief and Development
IRS	Internal Revenue Service
IT	information technology

J9	U.S. Southern Command Partnering Directorate
JTF	joint task force
LOAF	Lakeview Outreach and Fellowship
MISP	minimum initial service package
MMDC	Midwest Mission Distribution Center
MOU	memorandum of understanding
NGO	non-government organization
NNU	National Nurses United
NORTHCOM	U.S. Northern Command
OFDA	Office of U.S. Foreign Disaster Assistance
PACOM	U.S. Pacific Command
PTPI	People to People International
PVO	private voluntary organization
RN	registered nurse
SCM	supply chain management
SOUTHCOM	U.S. Southern Command
UCSD PDS	University of California San Diego Pre-Dental Society
USAID	U.S. Agency for International Development
USNS	United States Navy Service
USS	United States ship
VA	Veterans Affairs
WASH	water supply, sanitation, and hygiene promotion

ACKNOWLEDGMENTS

We would like to thank our spouses, Kumiko Koelkebeck, Danielle Harper, and Kristi Fitz-Gerald, as well as our children, Jefferey, Aubrey, Wesley, and Brady Harper and Ryleigh, Connor, and Kaydence Fitz-Gerald, for their tremendous love, support and encouragement in our writing of this MBA project. We cannot express enough appreciation and thanks for their understanding as we dedicated ourselves to this research and they all sacrificed much.

We would also like to thank the contributors at SOUTHCOM, who generously provided us with information, insights, and answers to our numerous questions.

Additionally, we would like to thank the Acquisition Research Program, especially RADM James Greene, USN (Ret), Ms. Karey Shaffer, and Ms. Tera Yoder, for providing funding and resources to ensure the success of this MBA project.

Finally, we would like to thank Professors Bryan Hudgens and Aruna Apte, for their support, guidance, and encouragement throughout the duration of this project.

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I. INTRODUCTION

A. BACKGROUND

The U.S. military provides invaluable lift capability, critical material, and numerous other services. These services, coupled with the capabilities of non-government organizations (NGOs), enhance the capacity of both the U.S. military and NGOs during disaster relief efforts. According to Apte and Yoho (2012), “Although the U.S. military has a history of responding to humanitarian crises, there are significant areas where the effectiveness and efficiency of the response, as well as the coordination with non-military and non-governmental organizations, could improve” (p. 1). In order to improve efficiency during relief efforts, the capabilities, limitations, and coordination between the government and non-governmental organizations (NGOs) need to be identified to avoid redundancy in response. This research analyzes the significant players, both government and non-government, in the U.S. Southern Command (SOUTHCOM) area of responsibility (AOR) to identify their capabilities and limitations. By targeting the overlaps and gaps between these significant players, reallocation of resources in and among them will result in more streamlined processes and procedures for coordination, as well as a reduction in the redundancy in response.

Specifically, we study the 36 NGOs operating in the AOR as per the list provided to us by the U.S. Southern Command Partnering Directorate (J9). The end state of this research is to provide the commander with a quick reference guide. By leveraging the capabilities and managing the limitations of each NGO in the SOUTHCOM AOR, the commander will be able to provide a more efficient response to a humanitarian assistance and disaster relief (HA/DR) event using this guide.

Additionally, this research seeks to address the underlying issues of communication and collaboration resulting from the stove-piping that exists in and among government and non-government organizations. These stratifications prevent the

efficient allocation of resources, slow the response, and result in redundancy of response to a disaster. This, in turn, unnecessarily leaves some victims without the essentials of survival, while others have more than they need.

This inability to balance relief efforts among different portions of the affected population can lead to relative deprivation. Relative deprivation exists when there is a marked difference between one group's access to resources when compared with another group's access to resources. This difference can be actual or perceived.

In the event of a disaster, relative deprivation can spread quickly and cause unrest. It can even spark looting and rioting, as those feeling deprived struggle to acquire the essentials for survival they may or may not be lacking. This destabilization can further exacerbate disaster relief efforts and quickly break down any superficial bonds between organizations attempting to provide for those in need, thus making relief efforts even more inept and unproductive. This research results in a tool that will strengthen the lines of communication between organizations and allow them to better allocate resources to save lives, alleviate suffering, maintain human dignity, and stabilize the affected population to foster recovery.

B. MOTIVATION

Our motivation behind this project stems from the simple fact that a need exists. Disasters are inevitable and unpredictable. Historically, the approach to addressing these catastrophic events has been reactive in nature. Such a kneejerk response results in wasted resources, prolonged suffering, and often unrest. This unrest leads to a lack of security, which in turn leads to more wasted resources and a greater degree of suffering for all involved. Hence, a more deliberate approach is required to sufficiently address these complex events.

Senior leadership's recognition of a need for a deliberate approach in response to such events can be found in numerous publications and policies throughout various departments of the U.S. government. Specifically, Department of Defense (DoD) policy states, "Stability operations are a core U.S. military mission that the Department of Defense shall be prepared to conduct with proficiency equivalent to combat operations"

(Under Secretary of Department for Policy [USD(P)], 2009, p. 2). Considering the potential threat to stability that can arise from a disaster, it is easy to conclude that HA/DR operations are not much different from stability operations. Therefore, HA/DR should also be considered a core U.S. military mission that the DoD should prepare for and maintain similar proficiency as combat operations.

DoD policy further requires the military services to remain capable of intertwining with

...other U.S. Governmental agencies and foreign governments and security forces to ensure that when directed, the Department can: 1) establish civil security and civil control, 2) restore or provide essential services, 3) repair critical infrastructure, and 4) provide humanitarian assistance. (USD[P], 2009, p. 2)

These requirements, which are clearly stated through DoD policy, emphasize the point that the U.S. military must be prepared to response to an HA/DR event.

With this research, we attempt to develop a solution by analyzing the capabilities and limitations of the NGOs in response to an HA/DR event in order to identify overlaps and target the gaps. By leveraging the capabilities and managing the limitations of all organizations that respond to HA/DR events, we can provide decision-makers with the tools necessary to enhance the coordination between actors. This produces a more efficient response that minimizes suffering, reduces redundancy, maximizes resources, and stabilizes security. However, our research has its limitations.

C. LIMITATIONS

The first limitation of our research is the scope. The time allotted for this project is not sufficient to provide a comprehensive list of NGOs, as our research question suggests. This would require many more man hours and a team of experts dedicated to the development, implementation, and continuous maintenance of a capabilities network of this magnitude. As a matter of fact, through our correspondence with SOUTHCOM, we discovered that SOUTHCOM has already recognized this requirement and, as a result, established the J9. Hence, we only scratch the surface by laying the groundwork for the development of this network. We accomplish this by establishing a framework for

identifying the players that are significant based on certain criteria. Our research only includes 36 of over 155 NGOs operating in the SOUTHCOM AOR.

The second limitation is that this project focuses on the SOUTHCOM AOR only. There is a total of six U.S. AORs, split geographically throughout the world, which are the responsibility of their respective commanders: Northern Command (NORTHCOM), SOUTHCOM, Pacific Command (PACOM), European Command (EUCOM), African Command (AFRICOM), and Central Command (CENTCOM). Two other projects, by Daniels (2012) and Nguyen and Curley (2013), have been conducted in the EUCOM and PACOM using the same research question and similar methodology. This project expands on those already conducted.

D. RESEARCH QUESTION

What is the informed comprehensive list of NGOs operating in the SOUTHCOM AOR whose capabilities and limitations we can leverage in order to maximize efficiency and minimize redundancy in response to events requiring HA/DR?

E. METHODOLOGY

This research project focuses on the SOUTHCOM AOR. Because it is an expansion of ideas from two projects previously conducted for EUCOM and PACOM AORs, we knew that we should start by investigating whether or not a suitable solution was already developed within the SOUTHCOM AOR. We began our research by establishing a point of contact at SOUTHCOM. We discovered that the need for a capabilities network with regard to NGOs and HA/DR operations has been acknowledged through the establishment of the J9. However, a suitable solution has not yet been developed.

Since the J9 is still in its infancy, our research will play an integral role in laying the foundation that SOUTHCOM's capabilities network will be built upon. The J9's sole purpose is to develop a framework for a long-term solution to the complex problem of coordinating with NGOs. This is exactly the need we are trying to address with our research, and we are excited to work side by side with J9 to build its capabilities network.

By working directly with J9, we made real-time adjustments in our research, resulting in a more accurate assessment of current relationships between DOS, DoD, and the military. The first-hand knowledge gained from collaborating with SOUTHCOM sanctioned a more targeted identification of the overlaps in capabilities and gaps in responses between the military and NGOs. This gave rise to a more efficient and proactive approach to conducting HA/DR operations. This also resulted in a shared and targeted purpose that, in effect, permits the United States to respond as a team with targeted response and not a disparate conglomerate just trying to do the right thing.

The starting point and the foundation for our research was a list provided to us by the J9. The J9 gave us a list of 36 NGOs that it has successfully worked with in recent history. We analyzed this list through an aggregate Internet search (see our focused literature) and vetted each organization against the following five criteria: mission/primary focus, description (to include characteristics such as religious affiliation), capabilities, countries in the AOR currently/recently worked in, and whether or not the organization currently cooperates with the military in response to HA/DR events.

Next, we took the exact same methodology that both Daniels (2012) and Nguyen and Curley (2013) used for EUCOM and PACOM, respectively, and vetted them across the following five criteria: mission, capabilities, religious affiliation, countries currently operating in, and whether the organization cooperates with the military in response to HA/DR events. During our research and vetting process, we found the Sphere Project:

The Sphere Project is a voluntary initiative that brings a wide range of humanitarian agencies together around a common aim - to improve the quality of humanitarian assistance and the accountability of humanitarian actors to their constituents, donors and affected populations.

The Sphere Handbook, Humanitarian Charter and Minimum Standards in Humanitarian Response, is one of the most widely known and internationally recognized sets of common principles and universal minimum standards in life-saving areas of humanitarian response.

Established in 1997, the Sphere Project is not a membership organization. Governed by a Board composed of representatives of global networks of humanitarian agencies, the Sphere Project today is a vibrant community of humanitarian response practitioners. (The Sphere Project, n.d.)

Using the Sphere Project criteria, we analyzed the 36 NGOs and their self-proclaimed capabilities in the next stage of our research (see Chapter IV). To accomplish this analysis, we developed an NGO scorecard based upon the criteria outlined by the Sphere Project and applied those standards to each NGO. This process resulted in the creation of a decision-making tool (see Appendix A) to enhance the capabilities network. This appendix gives the commander a “50,000-foot view” of the AOR with regard to the capabilities and limitations of the organizations operating in and responding to HA/DR events.

Finally, we developed the commander’s cut card (see Appendix B). This quick reference guide provides the commander a “100,000-foot view” of the AOR with regard to the capabilities and limitations of the organizations operating in and responding to HA/DR events. It is an aggregate of the scoring conducted based on the Sphere Project and is contained on a manageable one-page document that the commander can carry on a clipboard. It breaks down each of the 36 NGOs’ capabilities under the four core competencies required by the Sphere Project to be an adequate provider of relief. It uses a simple color code:

- Green: full capability under the respective core competency,
- Yellow: partial capability under the respective core competency, and
- Red: no capability under the respective core competency.

II. LITERATURE REVIEW

A. BACKGROUND LITERATURE

In communicating with the J9, we received a list of NGOs that SOUTHCOM had previously used and analyzed its specific missions and capabilities for humanitarian relief during a disaster, given our methodology. The following section discusses that list in alphabetical order with their respective descriptions and the countries in the SOUTHCOM AOR in which they are currently assisting or have assisted in the past. See Figure 1 for map of SOUTHCOM AOR.



Figure 1. Map of SOUTHCOM AOR (from Central/South America and Caribbean Severe Weather Port Guide, n.d)

B. FOCUSED LITERATURE

1. Aero Bridge

Description: Aero Bridge is a group of “aviation specialists who coordinate emergency aviation response during disasters. Our primary mission is to assist governments and NGOs by moving people and supplies to where they are most needed” (Aero Bridge, n.d.b).

Currently or previously involved in SOUTHCOM: Haiti (Aero Bridge, n.d.b)

2. American Red Cross

Description: The Red Cross was chartered by the U.S. Congress to

...carry on a system of national and international relief in time of peace and apply the same in mitigating the sufferings caused by pestilence, famine, fire, floods, and other great national calamities, and to devise and carry on measures for preventing the same. The Charter is unique to the Red Cross because it assigns duties and obligations to the nation, to disaster survivors, and to the people who generously support our work through donations. (American Red Cross, n.d.b)

Currently or previously involved in SOUTHCOM: Bahamas, Belize, Chile, Colombia, Costa Rica, Ecuador, El Salvador, Guatemala, Guyana, Haiti, Honduras, Jamaica, Nicaragua, Panama, Paraguay, Peru, Saint Lucia (American Red Cross, n.d.c)

3. Americas Relief Team

Description: Americas Relief Team (ART) offers transportation and logistics assistance to non-profit organizations. The organization’s specialty is the aid and relief sector, where it has served for many years by air and sea following crises in the Caribbean and Central America (America’s Relief Team, n.d.a).

Currently or previously involved in SOUTHCOM: 2012 Disaster Relief Classic and Port Resiliency Program (PEP) (America’s Relief Team, n.d.a)

4. Baptist Health South Florida

Description: Baptist Health Medical Group is a non-profit organization of more than 100 physicians “who provide comprehensive, high quality medical care to patients of all ages” (Baptist Health South Florida, n.d.b).

Currently or previously involved in SOUTHCOM: The doctors at Baptist Health serve more than 12,000 people annually from Latin America and the Caribbean (Baptist Health South Florida, n.d.a).

5. Children International

Description: This organization describes its services as follows:

For over 75 years, Children International has been providing critical assistance to children and families struggling in terrible poverty. Through our one-to-one child sponsorship program, we reduce the burden of poverty on impoverished children, invest in their potential and provide them with opportunities to grow up healthy, educated and prepared to succeed and contribute to society. (Children International, n.d.a)

Currently or previously involved in SOUTHCOM: Honduras, Ecuador, Guatemala, Chile, Honduras, Dominican Republic, Colombia, and Mexico (Children International, n.d.b)

6. Courtland Humanitarian Outreach Worldwide

Description: This organization describes its services as follows:

Courtland Humanitarian Outreach Worldwide (CHOW) is a non-denominational organization incorporated in the State of Ohio, dedicated to helping relief efforts worldwide. ... The organized attempt by the community to collect humanitarian aid not only benefits the world’s poor, but our planet as well. (CHOW, n.d.a)

Currently or previously involved in SOUTHCOM: El Salvador, Panama, Bolivia, Nicaragua, Guatemala (CHOW, n.d.b)

7. EDGE Outreach (WaterStep)

Description: EDGE Outreach, also known as WaterStep, distributes and installs water treatment systems for use in developing communities. “They seek to prevent waterborne illness through sustainable solutions by training local people, solving problems creatively, and improving developing communities’ self-sufficiency” (EDGE Outreach, n.d.c).

Currently or previously involved in SOUTHCAM: Brazil, Costa Rica, Dominican Republic, Guatemala, Haiti, Honduras, Mexico Nicaragua, Panama, Peru (EDGE Outreach, n.d.c)

8. Florida Association for Volunteer Action in the Caribbean and the Americas

Description: This organization describes its work in the following way:

The Florida Association for Volunteer Action in the Caribbean and the Americas (FAVACA) is a private not for profit organization formed in 1982 by Florida Governor (now former U.S. Senator) Bob Graham. FAVACA’s Florida International Volunteer Corps is the only program of its kind in the country and enjoys statutory authority under Section 288.0251 Florida Statutes. A state appropriation, voted annually since 1986, provides a funding base for an estimated 100 volunteer missions to Latin America and the Caribbean each year. (FAVACA, n.d.d)

Currently or previously involved in SOUTHCAM: Antigua & Barbuda, Aruba, Bahamas, Barbados, Bonaire, Belize, Cayman Islands, Costa Rica, Dominica, Dominican Republic, El Salvador, Grenada, Guatemala, Guyana, Haiti, Honduras, Jamaica, Nicaragua, Panama, St. Kitts & Nevis, St. Lucia, St. Vincent & the Grenadines, Trinidad & Tobago, Venezuela (FAVACA, n.d.d)

9. Food for the Poor

Description: Food for the Poor is an interdenominational Christian ministry that “serves the poorest of the poor in 17 countries throughout the Caribbean and Latin America” (Food for the Poor, n.d.a). They are the third largest international relief and development charity in the United States, feeding two million poor every day. They also

provide food, housing, health care, education, water projects, and emergency relief to Caribbean and Latin America (Food for the Poor, n.d.a).

Currently or previously involved in SOUTHCAM: Antigua, Belize, Dominica, Dominican Republic, El Salvador, Grenada, Guatemala, Guyana, Haiti, Honduras, Jamaica, Nicaragua, Panama, St. Lucia, St. Vincent, Trinidad & Tobago, Venezuela (Food for the Poor, n.d.b)

10. Foundation for the Advancement of Children’s Esthetics

Description: The Foundation for the Advancement of Children’s Esthetics is dedicated to providing “free facial reconstructive surgery to underprivileged children” (Foundation for the Advancement of Children’s Esthetics, n.d.).

Currently or previously involved in SOUTHCAM: None

11. Give a Kid a Backpack

Description: This organization describes its work in the following way:

In much of the world, education is only technically free. Children may attend school for free but they need to pay registration fees and supply their own uniforms and school supplies. These modest requirements are simply beyond the reach of most poor children in these countries. Give a Kid a Backpack targets children who live in severe conditions of poverty who are eager to go to school but don’t have the funds to fulfill these requirements. (Give a Kid a Backpack, n.d.a)

Currently or previously involved in SOUTHCAM: Honduras, Haiti (Give a Kid a Backpack, n.d.b)

12. Heart to Heart International

Description: This organization describes its work in the following way:

Heart to Heart International is a global volunteer movement. Its core purpose is to transform lives through service—one volunteer and one community at a time. All activities are geared to improve health in underserved communities. We fulfill our mission by connecting people and resources to a world in need. (Heart to Heart International, n.d.d)

Currently or previously involved in SOUTHCOM: Haiti (Heart to Heart International, n.d.c)

13. Hope Haven

Description: This organization describes its work in the following way:

Hope Haven is a community committed to the special creation of God that is the human being; encouraging the realization of dreams, desires, and aspirations, valuing gifts, talents, and contributions, sharing accountability for individual and community growth. (Hope Haven, n.d.b)

Currently or previously involved in SOUTHCOM: Guatemala (Hope Haven, n.d.b)

14. Hospital Sisters Mission Outreach

Description: This organization describes its work in the following way:

The 501(c)(3) not-for-profit organization, whose Main Office is in Springfield, IL, addresses the serious unmet medical needs of people in developing countries and promotes a more green-friendly environment through a medical recovery and responsible redistribution program. (Hospital Sisters Mission Outreach, n.d.a)

Currently or previously involved in SOUTHCOM: Haiti, Honduras, Cuba (Hospital Sisters Mission Outreach, n.d.b)

15. InterAction

Description: This organization describes its work in the following way:

Inter Action serves as a convener, thought leader and voice of our community. Because we want real, long-term change, we work smarter: We mobilize our members to think and act collectively, because we know more is possible that way. We also know that how we get there matters. So we set high standards. We insist on respecting human dignity. We work in partnerships. (InterAction, n.d.a)

Currently or previously involved in SOUTHCOM: Mexico, Belize, Dominican Republic, El Salvador, Guatemala, Guyana, Haiti, Honduras, Jamaica, Nicaragua,

Columbia, Ecuador, Bolivia, Brazil, Peru, Paraguay, Chile, and Argentina (InterAction, n.d.e)

16. International Relief and Development (IRD)

Description: This organization describes its work in the following way:

A nonprofit humanitarian and development organization, IRD improves lives and livelihoods through inclusion, engagement, and empowerment. We build lasting relationships and strengthen our beneficiaries' capabilities to create sustainable change and direct their own development. (International Relief and Development [IRD], n.d.a)

Currently or previously involved in SOUTHCOM: Colombia, Haiti (IRD, n.d.a)

17. Johns Hopkins Office of Critical Preparedness and Response (CEPAR)

Description: This organization describes its work in the following way:

CEPAR combines the talents of Johns Hopkins Medicine with the tactical planning capabilities of the Applied Physics Laboratory, the investigative skills of the School of Public Health, and the faculty and facilities of the Johns Hopkins University. (CEPAR, n.d.a)

Currently or previously involved in SOUTHCOM: Haiti (CEPAR, n.d.c)

18. Latter-day Saints (LDS) Charities

Description: This organization describes its work in the following way:

LDS Charities sponsor[s] relief and development projects in 179 countries. The organization provide[s] emergency relief assistance in times of disaster as well as primary community development programs such as clean water, neonatal resuscitation training, vision care, wheelchairs, immunizations, and food production. (LDS Charities, n.d.i)

Currently or previously involved in SOUTHCOM: Antigua & Barbuda, Argentina, Bahamas, Barbados, Belize, Bolivia, Brazil, Cayman Islands, Chile, Colombia, Costa Rica, Cuba, Dominica, Dominican Republic, Ecuador, El Salvador,

Grenada, Guatemala, Guyana, Haiti, Honduras, Jamaica, Nicaragua, Panama, Paraguay, Peru, Puerto Rico, Saint Kitts & Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago, Uruguay, Venezuela (LDS Charities, n.d.h)

19. Lions Clubs International Foundation

Description: This organization describes its work in the following way: “The Lions Clubs International Foundation provides sight programs, youth programs, services for children, health programs, and disaster relief” (Lions Clubs International Foundation, n.d.a).

Currently or previously involved in SOUTHCOM: Antigua & Barbuda, Argentina, Bahamas, Barbados, Belize, Bolivia, Brazil, Cayman Islands, Chile, Colombia, Costa Rica, Cuba, Dominica, Dominican Republic, Ecuador, El Salvador, Grenada, Guatemala, Guyana, Haiti, Honduras, Jamaica, Nicaragua, Panama, Paraguay, Peru, Puerto Rico, Saint Kitts & Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago, Uruguay, Venezuela (“Lions Club International,” n.d.)

20. Loving Hugs

Description: This organization describes its work in the following way: “Loving Hugs collects stuffed animals and distributes them to children in war zones, orphanages, refugee and IDP [internally displaced person] camps, and medical/hospital facilities around the world” (Loving Hugs, n.d.a).

Currently or previously involved in SOUTHCOM: Argentina, Barbados, Chile, Colombia, Cuba, Ecuador, El Salvador, Guatemala, Guyana, Haiti, Jamaica, Nicaragua, Panama, Peru, St. Lucia (Loving Hugs, n.d.b)

21. Miami Children’s Hospital

Description: This organization describes its work in the following way:

Miami Children’s Hospital is a world leader in pediatric healthcare. With a medical staff of more than 650 physicians and over 3,500 employees, the hospital is renowned for excellence in all aspects of pediatric medical care from birth through

adolescence. Miami Children's Hospital offers more than 40 pediatric specialties and subspecialties, and is home to Florida's only free-standing pediatric trauma center. (Miami Children's Hospital, n.d.a)

Currently or previously involved in SOUTHCAM: None

22. Midwest Mission Distribution Center

Description: This organization describes its work in the following way:

Midwest Mission Distribution Center (MMDC) is a disaster relief facility located on an 8 acre campus, 4 miles south of Springfield, Illinois. Construction began in October of 1999 and opened for ministry in the year 2000. MMDC is a caring ministry related to the Illinois Great Rivers Conference and the North Central Jurisdiction of the United Methodist Church. MMDC is also a cooperating depot in the UMCOR (United Methodist Committee on Relief) Relief Supply Network as of January 2010. Help God's people in need locally, nationally, and around the world. (Midwest Mission Distribution Center, n.d.d)

Currently or previously involved in SOUTHCAM: Costa Rica, El Salvador, Honduras, Jamaica, Panama, Santiago (Midwest Mission Distribution Center, n.d.e)

23. Operation Smile

Description: This organization describes its work in the following way:

Operation Smile is an international children's medical charity that heals children's smiles, forever changing their lives. As an international charity for children, we measure ourselves by the joy we see on all of the faces we help. At Operation Smile, we're more than a charity. More than an NGO, we're a mobilized force of medical professionals and caring hearts that provide safe, effective reconstructive surgery and related medical care for children born with facial deformities such as cleft lip and cleft palate. (Operation Smile, n.d.f)

Currently or previously involved in SOUTHCAM: Brazil, Bolivia, Colombia, Dominican Republic, Ecuador, Guatemala, Haiti, Honduras, Mexico, Nicaragua, Peru, Paraguay, Panama, Venezuela (Operation Smile, n.d.g)

24. Partners in Health

Description: This organization describes its work in the following way:

We draw on the resources of the world's leading medical and academic institutions and on the lived experience of the world's poorest and sickest communities. At its root, our mission is both medical and moral. It is based on solidarity, rather than charity alone. When our patients are ill and have no access to care, our team of health professionals, scholars, and activists will do whatever it takes to make them well—just as we would do if a member of our own families or we ourselves were ill. (Partners In Health, n.d.b)

Currently or previously involved in SOUTHCOM: Dominican Republic, Haiti, Peru (Partners In Health, n.d.c)

25. People to People International (PTPI)

Description: This organization describes its work in the following way:

People to People International (PTPI) is dedicated to enhancing cross-cultural communication within and across communities and nations. Tolerance and mutual understanding are central themes. While not a partisan or political institution, PTPI supports the basic values and goals of its founder, President Dwight D. Eisenhower. (People to People International [PTPI], n.d.)

Currently or previously involved in SOUTHCOM: We found no information on work in specific SOUTHCOM countries.

26. Project C.U.R.E.

Description: This organization describes its work in the following way:

Project C.U.R.E. operates distribution centers in Colorado, Tennessee, Texas and Arizona and collects excess supplies and specialized equipment from hundreds of U.S. hospitals and medical manufacturers, giving them the opportunity to “green” their operations and redirect their surplus in an environmentally-friendly way. In addition, Project C.U.R.E. sends volunteer medical teams to underserved facilities abroad to provide free care and train local healthcare staff. Today, Project C.U.R.E. is the world's largest distributor of donated medical supplies to resource-

limited communities across the globe, touching the lives of patients, families, and children in more than 130 countries. (Project C.U.R.E., n.d.b)

Currently or previously involved in SOUTHCOM: Bolivia, Brazil, Chile, Colombia, Ecuador, Guyana, Peru, Paraguay, Uruguay (Project C.U.R.E., n.d.e)

27. Project Handclasp Foundation

Description: This organization describes its work in the following way:

Since the inception of Project Handclasp in 1959, distribution of humanitarian, educational, and goodwill material to disadvantaged people in foreign countries has greatly enhanced perceptions of the United States and the U.S. Navy. Through direct person-to-person contact in the conduct of community relations endeavors, Project Handclasp plays a vital role in enabling the Navy to carry out its mission of fostering peace and goodwill by promoting international friendship and trust. It has simultaneously allowed U.S. Navy personnel to gain insight and appreciation of diverse cultures and quality of life of people of other nations. (Project Handclasp Foundation, 2013)

Currently or previously involved in SOUTHCOM: Antigua & Barbuda, Argentina, Bahamas, Barbados, Belize, Bolivia, Brazil, Cayman Islands, Chile, Colombia, Costa Rica, Cuba, Dominica, Dominican Republic, Ecuador, El Salvador, Grenada, Guatemala, Guyana, Haiti, Honduras, Jamaica, Nicaragua, Panama, Paraguay, Peru, Puerto Rico, Saint Kitts & Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago, Uruguay, Venezuela (Project Handclasp Foundation, 2013)

28. Project HOPE

Description: This organization describes its work in the following way:

Founded in 1958, Project HOPE (Health Opportunities for People Everywhere) is dedicated to providing lasting solutions to health problems with the mission of helping people to help themselves. Identifiable to many by the SS HOPE, the world's first peacetime hospital ship, Project HOPE now provides medical training and health education, as well as conducts humanitarian assistance programs in more than 35 countries. (Project Hope, n.d.a)

Currently or previously involved in SOUTHCOM: Dominican Republic, Guatemala, Haiti, Honduras, Mexico, Nicaragua, Peru (Project Hope, n.d.c)

29. Registered Nurse Response Network (RNRN)

Description: The RNRN is a “national network of direct-care RNs powered by National Nurses United that coordinates sending volunteer RNs to disaster stricken areas where and when they are needed most” (National Nurses United [NNU], n.d.).

Currently or previously involved in SOUTHCOM: Haiti (NNU, 2010)

30. Rotary International

Description: Rotary International is a worldwide organization whose volunteers “combat hunger, improve health and sanitation, provide education and job training, promote peace, and eradicate polio” (Rotary International, n.d.b).

Currently or previously involved in SOUTHCOM: Antigua & Barbuda, Argentina, Bahamas, Barbados, Belize, Bolivia, Brazil, Cayman Islands, Chile, Colombia, Costa Rica, Cuba, Dominica, Dominican Republic, Ecuador, El Salvador, Grenada, Guatemala, Guyana, Haiti, Honduras, Jamaica, Nicaragua, Panama, Paraguay, Peru, Puerto Rico, Saint Kitts & Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago, Uruguay, Venezuela (Rotary International, n.d.c)

31. Spirit of America

Description: Spirit of America is a non-profit company that assists Americans serving in Afghanistan, Iraq, and Africa to help the local people of those areas. The organization was founded in 2003 (Spirit of America, n.d.).

Currently or previously involved in SOUTHCOM: None

32. The MESSAGE Program

Description: This organization describes its work in the following way:

The MESSAGE program secures donations of supplies and equipment in the U.S. for distribution to providers in other countries. We distribute donated items based on an evaluation of

the recipients' actual need. It ensures that the recipients receiving the donations have the adequate training and capacity to use the donations responsibly. (The MESSAGE Program, n.d.b)

Currently or previously involved in SOUTHCOM: Dominican Republic, Guatemala (The MESSAGE Program, n.d.a)

33. University of California San Diego Pre-Dental Society

Description: The University of California San Diego Pre-Dental Society (UCSD PDS) is a:

student organization that promotes student interest in the field of dentistry. Perhaps the most unique quality of the UCSD PDS is the UCSD Student-run Free Dental Clinic Project. Our program is unique in that we are the only undergraduate program not affiliated with a dental school that manages and runs three free dental clinics with the help of dental professionals. (University of California San Diego Pre-Dental Society [UCSD PDS], n.d.b)

Currently or previously involved in SOUTHCOM: Caribbean and Central America (UCSD PDS, n.d.b)

34. Veterinarians Without Borders

Description: “Veterinarians Without Borders advances human health and livelihoods in underserved areas by sustainably improving veterinary care and animal husbandry, working toward preventing, controlling and eliminating priority diseases” (Veterinarians Without Borders, n.d.). The organization explains its objectives as follows:

- to be excellent teachers of veterinary service and care measured by our ability to communicate and transfer knowledge that results in the enhancement of veterinary skills in underserved areas;
- to be a leading non-profit organization by building global and local capacity in high quality veterinary education, service and care;
- to develop and strengthen value chains for the producer and veterinary care providers that improves animal and human health as well as economic growth. (Veterinarians Without Borders, n.d.)

Currently or previously involved in SOUTHCOM: None

35. Wheelchair Foundation

Description: This organization describes its work in the following way:

The Wheelchair Foundation deliver[s] brand new manual wheelchairs to people in need in 150+ countries worldwide. Established on June 6th, 2000 by Philanthropist Kenneth E. Behring, the Wheelchair Foundation has delivered more than 780,000 wheelchairs to people in need, free of charge. (Wheelchair Foundation, n.d.b)

Currently or previously involved in SOUTHCOM: Antigua & Barbuda, Argentina, Bahamas, Barbados, Belize, Bolivia, Brazil, Cayman Islands, Chile, Colombia, Costa Rica, Cuba, Dominica, Dominican Republic, Ecuador, El Salvador, Grenada, Guatemala, Guyana, Haiti, Honduras, Jamaica, Nicaragua, Panama, Paraguay, Peru, Puerto Rico, Saint Kitts & Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago, Uruguay, Venezuela (Wheelchair Foundation, n.d.a)

36. World Vets

Description: This organization describes its work in the following way:

World Vets develops, implements, and manages international veterinary and disaster relief programs to help animals, educate people and have a positive impact on communities. Improving animal welfare and alleviating suffering are high on our priority list but our work extends beyond that. Our programs help to prevent the spread of diseases from animals to humans; our livestock programs help small farmers to pull themselves out of poverty, and our disaster relief efforts for animals directly impact people who might otherwise remain in dangerous situations if the needs of their animals are not addressed. (World Vets, n.d.e)

Currently or previously involved in SOUTHCOM: Caribbean, Central America, South America (World Vets, n.d.h)

III. DATA COLLECTION AND OBSERVATIONS

A. NONGOVERNMENTAL ORGANIZATIONS

When an HA/DR event occurs, it is sudden and the response must be quick. NGOs help bridge the gap between the government and other agencies in the first, critical 72 hours in order to provide the right resources to the right people in order to save lives, alleviate human suffering, maintain human dignity, and provide the stability required to foster recovery. The value of NGOs is that they are already positioned in the affected country to help provide assistance when requested by the host nation.

Additionally, NGOs work indigenously with the local populace on a day-to-day basis to raise the standard of living and provide long-term solutions that allow for self-sustainment. These established relationships foster resilient bonds between the NGOs and the local populace. These bonds established through trust and respect can be leveraged by a commander to gain valuable information and funnel resources targeted to specific needs, resulting in a more efficient response that minimizes suffering, reduces redundancy, maximizes resources, and stabilizes security.

The 36 NGOs that we researched were taken from a list provided to us by Southern Command's Partnering Directorate (J9). Some of these organizations provide very little capability specific to HA/DR operations, but instead deliver capabilities specific to recovery, stability, or quality of life.

It is important for a commander to know precisely what an organization can bring to the relief effort so that a response can be targeted to the exact requirements, supply, and demand. This section contains information on the 36 NGOs' mission or primary focus, capabilities, religious affiliation, previous experience with the DoD, and budget in order to provide a snapshot of the value of each NGO.

B. NGO LISTING

The following information was collected directly from each NGO's website and annual financial reports. Financial Data in the budget section reflects the available data

for each organization; as a result there are some inconsistencies in the specific data reported. The citations for each referenced webpage are listed after the respective section for which the information was retrieved. In most cases, the mission/primary focus was directly quoted to retain the true mission of each organization.

1. Aero Bridge

Mission/Primary Focus:

Our mission is to assist in times of catastrophic emergency by coordinating donated aircraft to provide a powerful, immediate response to disaster. By matching aircraft with emergency response teams and critical supplies, we are able to provide a vital window of assistance to save lives and aid those in need. (Aero Bridge, n.d.b)

Capabilities: Aero Bridge has

...five major logistics bases in the United States, which will allow us to begin initial response efforts as rapidly as possible. To do this, we are continually forming new working relationships with FBOs [faith-based organization], NGOs, and Government agencies and aircraft owner/operators. The coordination of effort and intelligence that these relationships provide will serve to ensure that the assets pledged are utilized to maximum effect in time of need. (Aero Bridge, n.d.b)

Religious Affiliation: No affiliation.

Previous experience with the DoD: Unified Response, Hurricane Katrina, and Super Storm Sandy (Aero Bridge, n.d.b)

Budget (2012):

- Revenue:

Contributions and Grants:	\$858.00
Investment Income:	<u>\$2.00</u>
Total Revenue:	\$860.00

- Expense:

Other Expenses:	<u>\$1012.00</u>
Total Expense:	\$1012.00

- Net Income:

Total Revenue:	\$860.00
Total Expense:	<u>\$1012.00</u>
Net Income:	-\$152.00(Aero Bridge, n.d.a)

2. American Red Cross

Mission/Primary Focus: The American Red Cross “prevents and alleviates human suffering in the face of emergencies by mobilizing the power of volunteers and the generosity of donors” (American Red Cross, n.d.c).

Capabilities: This organization lists its capabilities as follows:

- Deploying disaster experts to assess the humanitarian needs, organize relief distributions and provide emergency shelter;
- Mobilizing relief supplies, ranging from tarps and blankets to cooking items and hygiene supplies;
- Contributing financial assistance to support the local purchase and delivery of relief supplies, and other essential services such as emergency shelter, health care, clean water and emotional support; and
- Reconnecting families that are separated across borders by war or disaster. (American Red Cross, n.d.d)

Religious Affiliation: No affiliation.

Previous experience with the DoD: Unified Response (American Red Cross, n.d.b)

Budget (2012):

- Revenue:

Products & Services:	\$2,229,700,000.00
Contributions:	\$670,100,000.00
Investment Income:	<u>\$209,700,000.00</u>
Total Revenue:	\$3,170,500,000.00
- Expense:

Program Services:	\$3,204,300,000.00
Supporting Services:	<u>\$140,800,000.00</u>
Total Expense:	\$3,345,100,000.00

(American Red Cross, 2013)

3. Americas Relief Team

Mission/Primary Focus: The mission of Americas Relief Team is to “reduce the suffering and increase the self-sufficiency of the most vulnerable groups in the Americas, and provide tools and resources needed to increase their self-sufficiency” (Americas Relief Team, n.d.a).

Capabilities: This organization “provides cost-effective relief logistics and development programs in three core sectors: Emergency Response Logistics, Building & Rebuilding Infrastructure, Private Sector Development” (Americas Relief Team, n.d.a).

Religious Affiliation: No affiliation (Americas Relief Team, n.d.a).

Previous experience with the DoD:

September 9, 2009—*Americas* Relief & Development Team (ART) is proud to have signed a Memorandum of Understanding (MOU) with the United States Southern Command. United States Southern Command is a Combatant Command within the Department of Defense responsible for military operations within South and Central America and the Caribbean (the “region”). Its mission is to conduct military operations and promote security cooperation to achieve United States strategic objectives in the region. (America’s Relief Team, n.d.c)

Budget (2012):

• Revenue:		
	Contract and Grant:	\$595,348.00
	Gifts in Kind:	\$9,909.00
	Contributions:	<u>\$353,438.00</u>
	Total Revenue:	\$958,695.00
• Expense:		
	Supporting Services	\$93,026.00
	Program Services:	<u>\$831,369.00</u>
	Total Expense:	\$924,395.00

- Net Income:

Total Revenue:	\$958,695.00
Total Expense:	<u>\$924,395.00</u>
Net Income:	\$34,300.00

(America’s Relief Team, n.d.b)

4. Baptist Health South Florida

Mission/Primary Focus: The mission of Baptist Health South Florida is

to improve the health and well-being of individuals, and to promote the sanctity and preservation of life, in the communities we serve. Baptist Health is a faith-based organization guided by the spirit of Jesus Christ and the Judeo-Christian ethic. We are committed to maintaining the highest standards of clinical and service excellence, rooted in the utmost integrity and moral practice. Consistent with its spiritual foundation, Baptist Health is dedicated to providing high-quality, cost-effective, compassionate healthcare services to all, regardless of religion, creed, race or national origin, including, as permitted by its resources, charity care to those in need. (Baptist Health South Florida, n.d.b)

Capabilities: Physical medicine, primary care, breast surgery, gastroenterology, heart surgery, thoracic surgery, cardiology, general surgery, neurosurgery, orthopedics and sports medicine, pediatric orthopedics, internal medicine, hospital medicine (Baptist Health South Florida, n.d.f)

Religious Affiliation: Baptist (Baptist Health South Florida, n.d.e)

Previous experience with the DoD: Unified Response (Baptist Health South Florida, n.d.d)

Budget (2012):

- Revenue:

Products & Services:	\$83,270,000.00
Operating Net Income:	\$2,320,100,000.00
Surplus Health Care:	\$317,450,000.00
Investment Income:	<u>\$234,170,000.00</u>
Total Revenue:	\$2,954,990,000.00

- Expense:

Program Services:	<u>\$2,240,000,000.00</u>
Total Expense:	\$3,345,100,000.00 (Baptist Health South Florida, 2013)

5. Children International

Mission/ Primary Focus:

Our mission is to bring real and lasting change to children living in poverty. In partnership with contributors, we reduce their daily struggles, invest in their potential, and provide them with the opportunity to grow up healthy, educated and prepared to succeed and contribute to society. (Children International, n.d.a)

Capabilities: “Children International’s sponsorship program is designed to impact every phase of a child’s life” (Children International, n.d.d) in the following ways:

- Coordinates Sponsorship program to improve the lives of poor children by providing basic necessities, benefits and services and programs that support long-term development and opportunities that prepare them for success.
- Focuses on the following areas: Health, Education, Nutrition, Youth Programs, Skill-Building, Family Assistance, and Community Support. (Children International, n.d.c)

Religious Affiliation: No affiliation.

Previous experience with the DoD: Unified Response (Children International, n.d.c)

Budget (2012):

- Revenue:

Sponsorships and Contributions:	\$96,951,570.00
Corporate Gifts and Commodities:	\$60,867,146.00
Legacies and Bequests:	\$1,934,140.00
Grants and Other Income, Net:	<u>\$351,833.00</u>
Total Public Support and Revenue:	\$160,104,689.00

- Expense:

Worldwide Program Services:	\$131,116,015.00
Supporting Services:	<u>\$27,158,075.00</u>
Total Expenses:	\$158,274,090.00

- Net Income:

Total Revenue:	\$160,104,689
Total Expense:	<u>\$158,274,090</u>
Net Income:	\$1,830,599

(Children’s International, 2013)

6. Cortland Humanitarian Outreach Worldwide (CHOW)

Mission/Primary Focus: “CHOW is a local effort of the Cortland-Bazetta community, shared in cooperation with Lakeview Outreach and Fellowship (LOAF), to have a worldwide impact for the relief and benefit of those in need” (CHOW, n.d.a).

Capabilities:

The unused and discarded materials of one society can become the useful items needed by poor families and children in our community, our country and around the world. Such items include: clothing, books, school supplies and equipment, toys, sports equipment, food and household supplies. (CHOW, n.d.a)

Religious Affiliation: Non-denominational (CHOW, n.d.c)

Previous experience with the DoD: New Horizons, which is “a U.S. military program that builds schools and clinics. The job was to ensure that the schools and clinics had the necessary equipment in place before turning them over to the different countries” (CHOW, n.d.b).

Budget (2001): Only one IRS form 990 was filed in 2001.

- Revenue:

Products & Services:	\$0.00
Contributions:	\$0.00
Investment Income:	<u>\$0.00</u>
Total Revenue:	\$0.00

- Expense:

Program Services:	\$0.00
Supporting Services:	<u>\$0.00</u>
Total Expense:	\$0.00

(CHOW, 2002)

7. **EDGE Outreach (WaterStep)**

Mission/Primary Focus:

Our goal is to see the day when everyone has safe water to drink. We focus on providing solutions to the world’s water crisis, from bringing safe water to developing countries to providing water for disaster relief and emergency contingency plans in local communities. (EDGE Outreach, n.d.c)

Capabilities:

We use technology and training to create sustainable solutions to the water problem. We can equip you and your team to work alongside us as we make steps toward solving the global water problem. (EDGE Outreach, n.d.c)

Disaster Relief, Emergency Management, and Medical/Dental Support:

“WaterStep equips your team with effective solutions that allow disaster relief or first-responders to be more efficient and self-sustaining on location” (EDGE Outreach, n.d.b).

WaterStep offers the following resources, as described on its website:

- “The WaterStep M-100 chlorinator presents a solution:
- Small enough to fit in a carry-on suitcase, allowing easy transport to the field.
- Powerful enough to produce 38,000 liters of safe water each day.
- Does not require an electrical source. The M-100 operates on a handful of ordinary table salt and a 12-volt car battery” (Edge Outreach, n.d.b).
- The WaterStep Mobile Water System includes the following features:
- “A complete mobile mini-water treatment system which includes the WaterStep water purifier, filters, pumps and water bladders.
- Generate your own cleaning and sanitizing solutions.
- Collapsible containers for the distribution of water” (EDGE Outreach, n.d.b).

Community Development Support

- “WaterStep takes intentional steps in Community Development including:
- A community assessment
- Installation of a mini-water treatment plant or hand pump repair
- Community health and hygiene classes
- Training locals to be water and hygiene specialist
- Empowering the nationals with the educational knowledge and materials
- Encouraging micro-business start-ups
- Track community health and successes
- Availability to WaterStep specialist (EDGE Outreach, n.d.a)”

Religious Affiliation: No affiliation.

Previous experience with the DoD: Unified Response (EDGE Outreach, n.d.c)

Budget (2012):

- Revenue:

Contributions and Grants:	\$1,072,881.00
Program Service Revenue:	<u>\$322,856.00</u>
Total Revenue:	\$1,395,737.00
- Expense:

Salaries:	\$447,032.00
Other:	<u>\$974,284.00</u>
Total Expense:	\$1,421,280.00
- Net Income:

Total Revenue:	\$1,395,737.00
Total Expense:	<u>\$1,421,280.00</u>
Net Income:	-\$25,543.00

(EDGE Outreach, 2013)

8. Florida Association for Volunteer Action in the Caribbean and the Americas (FAVACA)

Mission/Primary Focus: FAVACA provides support “through training and technical assistance, to improve environmental, social and economic conditions in the region” (FAVACA, n.d.d).

Capabilities: This organization lists its capabilities as follows:

- Air and seaport authorities and customs officials ensure the region complies with US Department of Homeland Security Mandates.
- Florida mayors and emergency planners show municipal authorities in the region to effectively protect against, plan for and manage disasters.
- Public health officials provide education in preventative healthcare and HIV/AIDs to community caregivers.
- Florida entomologists work with small farmers and agricultural associations to discover and eliminate Medfly, citrus-leaf eating butterflies and other threats to food sources in the region and in Florida.
- Florida entrepreneurs and planners share expertise on economic development and business planning techniques with their Caribbean counterparts.
- Marine scientists teach Caribbean counterparts to protect coral reefs and mangrove areas critical to their tourism sector as well as Florida's tourism and seafood industries.
- Florida regulators teach counterpart banks, commercial enterprises and regulators to recognize and interdict money-laundering and guard against corruption. (FAVACA, n.d.d)

Religious Affiliation: No affiliation.

Previous experience with the DoD: Unified Response (FAVACA, n.d.a)

Budget (2007):

• Revenue:	
State of Florida:	\$1,632,350.00
Contributions:	\$1,518,147.00
Federal Donations:	<u>\$119,938.00</u>
Total Revenue:	\$3,270,435.00

- Expense:

Program Services:	\$2,195,843.00
Supporting Services:	<u>\$399,098.00</u>
Total Expense:	\$2,594,941.00

(FAVACA, 2008)

9. Food for the Poor

Mission/Primary Focus:

To link the church of the First World with the church of the Third World in a manner that helps both the materially poor and the poor in spirit. The materially poor are served by local churches, clergy and lay leaders who have been empowered and supplied with goods by Food for the Poor. The poor in spirit are renewed by their relationship with and service to the poor through our direct ministry of teaching, encouragement and prayer. Ultimately, we seek to bring both benefactors and recipients to a closer union with our Lord. (Food for the Poor, n.d.c)

Capabilities: Food for the Poor aims to “provide housing, healthcare, education, fresh water, emergency relief and micro-enterprise assistance in addition to feeding hundreds of thousands of people each day” (Food for the Poor, n.d.a).

Religious Affiliation: Interdenominational Christian Ministries (Food for the Poor, n.d.a)

Previous experience with the DoD: None

Budget (2012):

- Revenue:

Contributions and Grants:	\$899,936,574.00
Investment Income:	\$33,192.00
Other Revenue:	<u>\$153,611.00</u>
Total Revenue:	\$900,123,377.00

- Expense:

Grants Paid:	\$827,570,023.00
Salaries:	\$22,188,507.00
Program Services:	<u>\$46,343,485.00</u>
Total Expense:	\$896,102,015.00

- Net Income:

Total Revenue:	\$900,123,377.00
Total Expense:	<u>\$896,102,015.00</u>
Net Income:	\$4,021,362.00

(Food for the Poor, 2013)

10. Foundation for the Advancement of Children’s Esthetics

Mission/Primary Focus: The Foundation for the Advancement of Children’s esthetics aims “to provide underprivileged children and adults with renewed confidence, to build self-esteem and enhance their emotional well-being and physical appearance” (Foundation for the Advancement of Children’s Esthetics, n.d.).

Capabilities: Plastic and general surgery (Foundation for the Advancement of Children’s Esthetics, n.d.)

Religious Affiliation: No affiliation.

Previous experience with the DoD: None

Budget: Never filed an IRS form 990.

11. Give a Kid a Backpack

Mission/Primary Focus: This organization’s goal is “enriching the lives of impoverished children around the world with backpacks filled with school supplies through the partnership with other nonprofit organizations” (Give a Kid a Backpack, n.d.a).

Capabilities: Give a Kid a Backpack “provides backpacks filled with school supplies through the partnership with other nonprofit organizations” (Give a Kid a Backpack, n.d.a).

Religious Affiliation: No affiliation.

Previous experience with the DoD: Joint Task Bravo, which works with the Honduran military to provide better facilities and resources for education and Unified Response (Give a Kid a Backpack, n.d.b)

Budget (2009):

- Revenue:

Contributions and Grants:	\$34,170.00
Investment Income:	\$0.00
Other Revenue:	<u>\$3,392.00</u>
Total Revenue:	\$38,102.00

- Expense:

Grants Paid:	\$28,270.00
Salaries:	\$0.00
Program Services:	<u>\$11,316.00</u>
Total Expense:	\$39,883.00

- Net Income:

Total Revenue:	\$38,102.00
Total Expense:	<u>\$39,883.00</u>
Net Income:	\$-1781.00

(Give a Kid a Backpack, 2010)

12. Heart to Heart International

Mission/Primary Focus: The mission of Heart to Heart International is

to improve global health through initiatives that connect people and resources to a world in need. Through our mobilization efforts, we provide medical education, deliver medical aid, respond to people in crisis and address community-health concerns around the globe. (Heart to Heart International, n.d.a)

Capabilities: A global humanitarian organization, HHI seeks to reduce human suffering by forming partnerships that create a healthier world. Focus is on health care development and global crisis response by providing the following:

- Care Kits
 - Personal hygiene is one of the top needs for people struggling to obtain reliable sources of food, water and shelter. Heart to Heart Care Kits offer that first line of defense against the spread of illness, a first step toward good health... and they provide dignity in a small bag for those who have suffered during crises. (Heart to Heart International, n.d.a)
- Global Health Programs
 - Established strong relationships with leading pharmaceutical companies that donate millions of dollars-worth of life-saving medicine to us every year. Provide medical supplies, first-aid supplies, bandages, syringes/needles, diagnostic instruments, etc.—that we provide to medical groups across America and around the world. (Heart to Heart International, n.d.b)
- Disaster Response
 - Created a set of medical modules that can be deployed at a moment’s notice to regions affected by natural or man-made disasters to treat patients and protect medical providers. We work with our global transportation partners at FedEx to send these modules to a qualified network of humanitarian partners. (Heart to Heart International, n.d.b)

Religious Affiliation: No affiliation.

Previous experience with the DoD: Unified Response (Heart to Heart International, n.d.c)

Budget (2011):

- Revenue:

Products & Services:	\$652,994.00
Contributions:	\$87,931,810.00
Investment Income:	<u> \$-2,838.00</u>
Total Revenue:	\$88,581,966.00
- Expense:

Program Services:	\$88,943,012.00
Supporting Services:	<u> \$4,384,426.00</u>
Total Expense:	\$93,327,438.00

(Heart to Heart International, 2012)

13. Hope Haven

Mission/Primary Focus: “As followers of Christ we unleash potential in people through work and life skills so that they may enjoy a productive life in their community” (Hope Haven, n.d.a).

Capabilities: Hope Haven “provides wheelchairs and other mobility aids to disabled poor in developing countries. ... [and] collects discarded wheelchairs and refurbishes and delivers them to poor people in 106 countries” (Hope Haven, n.d.a). They also spearhead a global network of relief agencies.

Hope Haven can also provide the following:

- Adult Living Services and Support
- Vocational Services and Job Placement
- Mental Health & Recovery
- Children and Family Services
- Hope Haven International Ministries
- Religious Services
- Additional/Supplemental Services. (Hope Haven, n.d.c)

Religious Affiliation: Christian (Hope Haven, n.d.a)

Previous experience with the DoD: Unified Response (Hope Haven, 2013a)

Budget (2012):

- Revenue:

Contributions and Grants:	\$195,163.00
Investment Income:	\$736.00
Other Revenue:	<u>\$420,549.00</u>
Total Revenue:	\$616,448.00
- Expense:

Salaries:	\$210,444.00
Program Services:	<u>\$526,956.00</u>
Total Expense:	\$737,400.00

- Net Income:

Total Revenue:	\$616,448.00
Total Expense:	<u>\$737,400.00</u>
Net Income:	-\$120,952.00

(Hope Haven, 2013b)

14. Hospital Sisters Mission Outreach

Mission/Primary Focus: This organization “responds to the sick, poor and needy through a medical equipment and supply recovery and distribution program and education and awareness opportunities” (Hospital Sisters Mission Outreach, n.d.a).

Capabilities:

At any given time there is more than \$3,000,000 in medical supplies and equipment in this building and the inventory is turned over at least two times a year. In 2009, a 17,000 square foot facility was rented in Chicago, becoming the Chicago Division. Surplus medical equipment and supplies are recovered primarily from hospitals, clinics, and major medical manufacturers in Illinois and Wisconsin. Upon request, these items are sent to healthcare providers in developing countries around the world. (Hospital Sisters Mission Outreach, n.d.a)

Religious Affiliation: Catholic (Hospital Sisters Mission Outreach, n.d.a)

Previous experience with the DoD: Mission Outreach was named “a preferred partner of the U.S. Navy’s Project Handclasp—allowing us to provide humanitarian assistance via U.S. Naval Vessels” (Hospital Sisters Mission Outreach, n.d.a). “With the assistance of the Navy, Mission Outreach transferred an ambulance to Buenos Aires via USS Pearl Harbor” (Hospital Sisters Mission Outreach, n.d.a).

Budget:

- Revenue:

Products & Services:	\$23,177.00
Contributions:	\$529,917.00
Investment Income:	<u>\$401,500.00</u>
Total Revenue:	\$954,594.00

- Expense:

Program Services:	\$14,385.00
Supporting Services:	<u>\$10,300.00</u>
Total Expense:	\$24,685.00

(Hospital Sisters Mission Outreach, 2012)

15. InterAction

Mission/Primary Focus: “What unites us is a commitment to working with the world’s poor and vulnerable, and a belief that we can make the world a more peaceful, just and prosperous place—together” (InterAction, n.d.a).

Capabilities: This organization lists its capabilities as follows:

- International Development has the goal of improving the well-being of the world’s poorest and most vulnerable people without compromising the ability of future generations to meet their needs. (Inter Action, n.d.c)
- Comprised of the policy and program staff of U.S. NGOs, the working groups collaborate in shaping strategies and approaches in food security and agriculture, livelihoods, gender, nutrition, health, governance, aid effectiveness and evaluation, youth development, environmental sustainability, adaptation to climate change, water and sanitation. Gender equity and environmental sustainability are cross-cutting priorities for the working groups. (Inter Action, n.d.d)
- InterAction and its members are committed to demonstrating and enhancing NGO accountability and impact in development and humanitarian action in disaster relief. To this end, InterAction’s work on accountability and learning spans across the organization and aims to maximize the effectiveness of development and humanitarian interventions. (Inter Action, n.d.f)
- InterAction works to improve NGO and donor accountability through our work on: PVO [private voluntary organization] Standards, Aid and Development Effectiveness, Open Forum for CSO [civil society organization] Development Effectiveness, Monitoring & Evaluation, and Transparency. (Inter Action, n.d.b)
- Humanitarian action is to save lives, alleviate suffering and maintain human dignity, without regard for race, ethnicity, religion or political affiliation. It should be guided by the principles of humanity, impartiality, neutrality and independence. Undertaken for the benefit of vulnerable people, humanitarian action may also facilitate the return to normal lives

and through preparedness and risk reduction may seek to lessen the destructive impact of disasters and complex emergencies. (Inter Action, n.d.f)

- InterAction addresses policy issues relating to improving the overall response of the international humanitarian system and the practice of providing humanitarian assistance, including protection, security, shelter, coordination, and disaster risk reduction. (Inter Action, n.d.c)
- InterAction is the nation’s leading policy advocate for international humanitarian relief and development programs. Using the collective voice of our more than 180 non-governmental organization (NGOs) members, InterAction shapes important U.S. and international policy decisions on relief and long-term development issues. These issues include foreign assistance, global health, food security, nutrition, water, climate change and education. (InterAction, n.d.g)

Religious Affiliation: No affiliation.

Previous experience with the DoD: Unified Response (InterAction, n.d.a)

Budget (2012):

- Revenue:

Contributions and Grants:	\$3,534,331.00
Program Services:	\$3,197,289.00
Investment Income:	\$41,473.00
Other Revenue:	<u>\$153,611.00</u>
Total Revenue:	\$6,810,374.00
- Expense:

Grants Paid:	\$65,000.00
Salaries:	\$5,747,573.00
Program Services:	<u>\$3,112,020.00</u>
Total Expense:	\$8,924,593.00
- Net Income:

Total Revenue:	\$6,810,374.00
Total Expense:	<u>\$8,924,593.00</u>
Net Income:	-\$2,114,219.00

(Inter Action, 2013)

16. International Relief and Development (IRD)

Mission/Primary Focus: IRD’s mission is “to reduce the suffering of the world’s most vulnerable groups and provide the tools and resources needed to increase their self-sufficiency” (IRD, n.d.a).

Capabilities: This organization lists its capabilities as follows:

- **Building Infrastructure**—IRD has worked with thousands of communities to complete construction and infrastructure development projects such as roads, health clinics, schools, and water and sanitation systems—in developing, high-risk, and conflict-affected areas. To successfully deliver infrastructure programs in such areas, IRD provides construction management and project support services using a community-based approach that mitigates risk and promotes sustainable development. (IRD, n.d.b)
- **Civil Society & Governance**—IRD works predominantly in conflict zones, fragile states, and slowly maturing democracies where well-functioning democratic institutions have not been the norm. In such societies, citizens and communities may not be familiar with or open to organizing and engaging with local government and community leadership organizations—unless they perceive an immediate and tangible benefit. IRD’s approach to civil society and community development cuts across all sectors of IRD’s work: we mainstream citizen engagement in improving access to economic opportunities, health, education, infrastructure, social resources, and services. (IRD, n.d.c)
- **Conflict Mitigation**—IRD’s conflict mitigation team supports the full spectrum of stability activities during major combat operations and in post-conflict settings. We build the capacity of our local partners and civil society organizations to support the transition to peace and democracy, and we assist communities to mitigate the potential for ethnic, tribal, religious, gang, and other conflict. Flexibility is at the core of our programming, and the conflict mitigation team employs management strategies adaptable to disparate environments, security challenges, and client needs. (IRD, n.d.d)
- **Emergency Response**—Our emergency response teams arrive immediately after a natural or man-made disaster strikes to identify and respond to the most immediate needs; then we continue support through the critical recovery and rehabilitation phases. Because IRD has operations around the world, we understand the local cultural and political context, and our staff is positioned for quick response. After the crisis stabilizes, our humanitarian assistance teams design recovery and rehabilitation programs that smoothly transition activities to IRD’s long-term development experts. (IRD, n.d.e)

- Food & Agriculture—IRD’s food and agriculture programs operate under a wide range of conditions, but all aim to improve the productivity and efficiency of food production, processing, and marketing systems. When possible, our programs also integrate nutrition, public health, sanitation, and water infrastructure, generating enduring results for communities worldwide. (IRD, n.d.f)
- Health & Hygiene—IRD designs and delivers comprehensive programs and services that improve the health of millions worldwide, particularly in communities affected by poverty, conflict, and natural disaster. Our cost-effective outreach, education and awareness, and relief and development programs are designed in collaboration with local organizations, government agencies, and health authorities. As a result, IRD mobilizes resources and provides critical assistance that empowers communities to rebuild and sustain healthcare infrastructure and systems, save lives, and improve health for the long term. (IRD, n.d.g)

Religious Affiliation: No affiliation.

Previous experience with the DoD: Unified Response, Afghanistan, Iraq, Libya (IRD, n.d.h)

Budget (2012):

- Revenue:

Products & Services:	\$477,465,615.00
Contributions:	\$63,182,282.00
Investment Income:	<u>\$3,178.00</u>
Total Revenue:	\$540,651,075.00
- Expense:

Program Services:	\$435,804,667.00
Supporting Services:	<u>\$40,397,422.00</u>
Total Expense:	\$476,202,089.00

(IRD, 2013)

17. Johns Hopkins Office of Critical Preparedness and Response (CEPAR)

Mission/Primary Focus: The mission of CEPAR is to serve as “the command center for enterprise-wide planning for, and reaction to, a disaster. CEPAR’s objectives are:

- To create and implement effective Johns Hopkins enterprise-wide planning and preparedness for critical events.
- To develop a model disaster response plan integrated with local, regional, military and federal entities.
- To serve as a model disaster planning and response system adaptable to other major metropolitan areas nationally and worldwide. (CEPAR, n.d.a)

Capabilities: This organization lists its capabilities as follows:

The Johns Hopkins Go Team, our deployable medical asset, was created in 2009 to provide medical support to regions in crisis due to natural or manmade disasters. The Go Team is comprised of nearly 200 members from a variety of medical disciplines and non-medical departments to include physicians, physician extenders, nurses, pharmacists, mental health providers, support technicians, respiratory therapists, EMT's [Emergency Medical Technician], dieticians, logistics specialists (facility and supply managers), administration/financial officers, medical clerks, safety and security officers, epidemiologists, public affairs, IT specialists, and researchers. Go Team members undergo a specialized training program on topics such as basic and advanced disaster life support, natural disasters, terrorist events, incident command, leadership skills, and communication. Depending on the complexity of the event and regional needs, the team composition may be scaled up or scaled down. The tactical capabilities of the team include mass casualty triage, establishing and/or staffing of field clinics for victims, medical support to land- and air-based evacuations, medical support to shelters, backfill in hospitals, and/or public health services such as surveying and vaccinations. (CEPAR, n.d.b)

Religious Affiliation: No affiliation.

Previous experience with the DoD: Unified Response, Navy's Continue Promise Mission in support of Haiti (CEPAR, n.d.c)

Budget: The organization does not file an IRS Form 990 under CEPAR. All financials are rolled up under an organization called Society of Sigma XI John Hopkins Chapter.

18. Latter-day Saints (LDS) Charities

Mission/Primary Focus: LDS Charities provide “aid regardless of cultural or religious boundaries” (LDS Charities, n.d.i).

Capabilities: This organization lists its capabilities as follows:

- Wheelchairs—“Wheelchairs and walking aids are provided to those in need who cannot afford one. The recipient’s mobility, employability, and independence are greatly increased” (LDS Charities, n.d.g).
- Clean Water—“Water and sanitation systems are built and communities are taught hygiene and system maintenance, empowering them to meet their long-term water needs” (LDS Charities, n.d.b).
- Emergency Response—“When disasters occur, food, clothing, medical supplies, and other emergency relief assistance is sent to bless the lives of those with urgent needs” (LDS Charities, n.d.c).
- Vision Care—“Local, qualified doctors are trained to diagnose and treat vision problems. Equipment and supplies essential for these procedures are also provided” (LDS Charities, n.d.f).
- Benson Food Initiative—“Quality of life is improved with home food production and nutrition training. Less disease and work absence lead to increased self-reliance” (LDS Charities, n.d.a).
- Immunization—“The efforts of LDS Charities to inform communities about vaccination campaigns have helped contribute to dramatically reduce measles-related deaths” (LDS Charities, n.d.d).
- Neonatal Resuscitation—“Volunteers train in-country medical personnel who in turn train others to assist with resuscitation of newborns with breathing difficulties” (LDS Charities, n.d.e).

Religious Affiliation: The Church of Jesus Christ of Latter-day Saints (LDS Charities, n.d.i)

Previous experience with the DoD: Unified Response (LDS Charities, n.d.i)

Budget (2011):

- Revenue:

Investment Income:	\$33,357.00
Total Revenue:	\$33,357.00

- Expense:

Grants Paid:	\$55,395.00
Other Expenses:	<u>\$26,840.00</u>
Total Expense:	\$82,235.00

- Net Income:

Total Revenue:	\$33,357.00
Total Expense:	<u>\$82,235.00</u>
Net Income:	-\$48,878.00

(LDS Charities, 2012)

19. Lions Clubs International

Mission/Primary Focus: Lions Club International seeks “to empower volunteers to serve their communities, meet humanitarian needs, encourage peace and promote international understanding through Lions clubs” (Lions Clubs International, n.d.c).

Capabilities: This organization lists its capabilities as follows:

- When it comes to meeting challenges, our response is simple: We serve. In 207 countries, in hospitals and senior centers, in regions battered by natural disaster, in schools and eyeglass recycling centers, Lions are doing community volunteer work, helping, leading, planning and supporting. Because we’re local, we can serve the unique needs of the communities we live in. And because we’re global, we can address challenges that go beyond borders. (Lions Club International Foundation, n.d.d)

- We want everyone to see a better tomorrow. That’s why we support sight programs and services including vision screenings, eye banks and eyeglass recycling. Provide eye care services to those at risk of losing their sight. And raise donations through campaigns like Sight First and Campaign Sight First II. (Lions Club International Foundation, n.d.d)

- We believe everyone deserves a healthy life. From providing health programs that focus on hearing loss to supporting efforts to control and prevent diabetes, Lions volunteers are working to improve the health of children and adults around the world. (Lions Club International Foundation, n.d.d)

- We empower the next generation. Whether it’s providing youth volunteer opportunities and leadership experiences in a Leo club or sharing a message of peace through our Peace Poster contest, our youth programs invest in the future by reaching out to young people. (Lions Club International Foundation, n.d.d)

- We serve local communities—and protect the planet. From performing hands-on community work and service projects to providing emergency assistance, our community and environment programs improve our communities – and protect the environment. (Lions Club International Foundation, n.d.d)

Religious Affiliation: No affiliation.

Previous experience with the DoD: Unified Response (Lions Clubs International, n.d.b)

Budget (2012):

- Revenue:

Products & Services:	\$8,349,266.00
Investment Income:	<u>\$293,290,087.00</u>
Total Revenue:	\$301,639,353.00

- Expense:

Program Services:	\$834,285.00
Supporting Services:	<u>\$37,330,852.00</u>
Total Expense:	\$38,165,137.00

(Lions Club International Foundation, 2013)

20. Loving Hugs

Mission/Primary Focus: This organization’s mission is “bringing comfort, hope, and aid to children, individuals, and families affected by way of poverty or natural disasters throughout the world” (Loving Hugs, n.d.a).

Capabilities: Provides stuffed animals (Loving Hugs, n.d.a)

Religious Affiliation: No affiliation.

Previous experience with the DoD: Unified Response (Loving Hugs, n.d.a)

Budget (2009):

- Revenue:

Contributions and Grants:	\$49,941.00
Investment Income:	<u>\$169.00</u>
Total Revenue:	\$50,110.00

- Expense:

Grants Paid:	\$3,575.00
Salaries:	\$6,497.00
Program Services:	<u>\$22,614.00</u>
Total Expense:	\$32,686.00

- Net Income:

Total Revenue:	\$50,110.00
Total Expense:	<u>\$32,686.00</u>
Net Income:	\$17,424.00

(Loving Hugs, 2010)

21. Miami Children’s Hospital

Mission/Primary Focus: “We provide hope through advanced care for our children and families” (Miami Children’s Hospital, n.d.c).

Capabilities: “Miami Children’s Hospital, one of the world’s top pediatric hospitals, provides comprehensive care and rehabilitation in all clinical areas for infants, children and young adults.” The hospital has a team of doctors that can provide tailored services in 40 specialties and sub-specialties of pediatrics (Miami Children’s Hospital, n.d.b).

Religious Affiliation: No affiliation (Miami Children’s Hospital, n.d.a).

Previous experience with the DoD: None

Budget (2011):

- Revenue:

Contributions and Grants:	\$11,422,370.00
Investment Income:	<u>\$7,353,310.00</u>
Total Revenue:	\$18,281,403.00

- Expense:

Grants Paid:	\$8,652,081.00
Salaries:	\$2,467,602.00
Other Expenses:	<u>\$2,257,593.00</u>
Total Expense:	\$13,377,276.00

- Net Income:

Total Revenue:	\$18,281,403.00
Total Expense:	<u>\$13,377,276.00</u>
Net Income:	\$4,904,127.00

(Miami’s Children’s Hospital, 2012)

22. Midwest Mission Distribution Center (MMDC)

Mission/Primary Focus: The MMDC’s mission is “to compassionately help God’s people in need locally, nationally, and around the world, and to offer a center to fulfill the call for service to our neighbors in Christ’s name” (MMDC, n.d.d).

Capabilities: The center provides resources to disaster areas in the forms of kits, including the following:

- school kits
- personal dignity kits
- health kits
- cleaning bucket kits
- bedding kits
- sewing kits
- birthing kits
- school desks
- medicine cabinets (MMDC, n.d.a, n.d.c, n.d.f)

Religious Affiliation: No affiliation.

Previous experience with the DoD: Unified Response (Midwest Mission Distribution Center, n.d.b)

Budget (2011):

- Revenue:

Products & Services:	\$464.00
Contributions:	\$452,556.00
Investment Income:	<u>\$834.00</u>
Total Revenue:	\$453,854.00

- Expense:

Program Services:	\$493,530.00
Supporting Services:	<u>\$109,938.00</u>
Total Expense:	\$603,468.00

(MMDC, 2012)

23. Operation Smile

Mission/Primary Focus:

Driven by our universal compassion for children, we work worldwide to repair childhood facial deformities by delivering safe, effective surgery and related medical care directly to patients. The global partnerships we create, the knowledge we share and the infrastructure we build leave a legacy that lives well beyond our medical missions, making a lasting difference in our world. (Operation Smile, n.d.e)

Capabilities: Operation Smile mobilizes anywhere to provide the following:

- Medical Missions—“The goal of every medical mission and all our surgical programs is to heal children’s smiles and transform lives across the globe” (Operation Smile, n.d.d).
- Global Standards of Care—“Bringing quality care to every child, every time. The organization’s Global Standards of Care ensures every patient treated by Operation Smile benefits from the same sophisticated equipment, procedures and highly trained, credentialed medical volunteers, no matter where they receive treatment” (Operation Smile, n.d.c).
- Education & Training—“Training is the cornerstone of who we are. It’s the only way to ensure that every child receives quality care every time, everywhere they receive surgery. The goal of Operation Smile training programs is to move toward sustainable programs conducted at the local level” (Operation Smile, n.d.b).
- Building Self Sufficiency—“The worldwide demand for cleft repair surgery is staggering and can only be met if we build a self-sustaining

network. Education, training, medical equipment, volunteerism and building a vital network of partner countries that give children with facial deformities the chance for a new life, a new future” (Operation Smile, n.d.a).

Religious Affiliation: No affiliation.

Previous experience with the DoD: Unified Response (Operation Smile, n.d.f)

Budget (2012):

- Revenue:

Contributions and Grants:	\$55,871,199.00
Program Services:	\$1,162,522.00
Investment Income:	\$16,544.00
Other Revenue:	<u>\$575,855.00</u>
Total Revenue:	\$56,474,410.00

- Expense

Grants Paid:	\$7,474,514.00
Salaries:	\$8,167,732.00
Other Expenses:	<u>\$36,009,726.00</u>
Total Expense:	\$51,627,972.00

- Net Income:

Total Revenue:	\$56,474,410.00
Total Expense:	<u>\$51,627,972.00</u>
Net Income:	\$4,846,438.00

(Operation Smile, 2013)

24. Partners In Health

Mission/Primary Focus: The mission of Partners In Health is to

...provide a preferential option for the poor in health care. By establishing long-term relationships with sister organizations based in settings of poverty, Partners In Health strives to achieve two overarching goals: to bring the benefits of modern medical science to those most in need of them and to serve as an antidote to despair. (Partners In Health, n.d.b)

Capabilities: Specializes in the following areas with built-in programs for sustainment: cancer & chronic diseases, cholera, HIV/AIDS, general surgery, women’s health, child health, community health worker, mental health, tuberculosis (Partners In Health, n.d.c)

Religious Affiliation: No affiliation.

Previous experience with the DoD: Unified Response (Partners In Health, n.d.a)

Budget (2012):

- Revenue:

Products & Services:	\$96,032,000.00
Contributions:	\$485,000.00
Investment Income:	<u>\$4,462,000.00</u>
Total Revenue:	\$100,979,000.00

- Expense:

Program Services:	\$112,896,000.00
Supporting Services:	<u>\$7,978,000.00</u>
Total Expense:	\$120,874,000.00

(Partners In Health, 2013)

25. People to People International (PTPI)

Mission/Primary Focus: PTPI “promotes international understanding and friendship through educational, cultural and humanitarian activities” (PTPI, n.d.).

Capabilities: Specializes in the following areas with built-in programs for sustainment: global landmine clearing, trains and educate volunteer organization for all ages, promotes international friendship (PTPI, n.d.)

Religious Affiliation: No affiliation (PTPI, n.d.).

Previous experience with the DoD: None

Budget (2012):

• Revenue:		
	Contributions and Grants:	\$3,143,689.00
	Investment Income:	\$1,446.00
	Other Revenue:	<u>\$160,088.00</u>
	Total Revenue:	\$3,305,223.00
• Expense:		
	Grants Paid:	\$2,577,208.00
	Salaries:	\$387,013.00
	Other Expenses:	<u>\$434,279.00</u>
	Total Expense:	\$3,338,500.00
• Net Income:		
	Total Revenue:	\$3,305,223.00
	Total Expense:	<u>\$3,338,500.00</u>
	Net Income:	-\$33,277.00

(PTPI, 2013)

26. Project C.U.R.E.

Mission/Primary Focus: “Project C.U.R.E. identifies, solicits, collects, sorts, and distributes medical supplies and services according to the imperative needs of the world.”
(Project C.U.R.E., n.d.b)

Capabilities: Specializes in the following areas with built-in programs for sustainment:

- C.U.R.E. Cargo—Manages an inspection, inventory and logistics process resulting in millions of dollars’ worth of medical supplies and equipment being placed directly into the hands of doctors to treat those with the greatest need. Project C.U.R.E. strategically collaborates with community partners in country to develop a high-level understanding of the scope of need. Our assessment process ensures that every container delivered will meet the specific needs of the recipient hospital or clinic, equipping them with life-saving tools to improve diagnosis, treatment and care of patients. (Project C.U.R.E., n.d.a)
- C.U.R.E. Clinics—Medical professionals on our trips connect with in-country hospital staff, provide healthcare in its purest form and experience

unparalleled travel adventures. Project C.U.R.E. offers 12 to 14 trips throughout the year, with a handful dedicated exclusively to maternal and infant healthcare. All clinic trip locations focus on clinics and hospitals where Project C.U.R.E. has delivered medical supplies and equipment and conducted thorough inspections and assessments. The average team includes 6 to 12 medical professionals and a trained C.U.R.E. Clinics team leader. While participation is open to everyone, there is great demand for physicians, OB/GYNs, pediatricians, surgeons, nurse practitioners and nurses. (Project C.U.R.E., n.d.c)

- C.U.R.E. Coffee—We partner with Boca Java who work directly with farmers to grow and harvest our new estate coffees high in the mountains of Nicaragua. Boca Java roasts the coffee fresh to your order, and donates \$3 per bag to Project C.U.R.E., who provides medical and humanitarian relief back to the farmers and their surrounding communities. (Project C.U.R.E., n.d.d)
- C.U.R.E Kits—C.U.R.E. Kits contain 48 lbs. of pre-packaged medical supplies, valued at \$2,000 that can be easily transported and checked as luggage on your next trip to an underserved region of the world. Average contents include exam supplies, wound care, personal hygiene items, consumables, and skin solutions—critical supplies that are desperately lacking in most clinics in developing countries but can provide much needed medical relief. (Project C.U.R.E., n.d.e)
- Kits for Kids—Kits for Kids contain basic “medicine cabinet” items that are often scarce in the developing world. If a child gets hurt, families might have to travel a long distance by bicycle, bus or on foot to receive care at the nearest hospital or medical clinic. Working with pediatricians and nurses, the Kits for Kids program provides parents in developing nations with basic need to help treat their child’s symptoms and illnesses. This small but powerful package contains items such as soap, hand sanitizer, pain reliever, adhesive bandages, and bug bite lotion. You also have the opportunity to include a solar light bulb to help prevent respiratory illness and painful burns from kerosene use. (Project C.U.R.E., n.d.f)

Religious Affiliation: No affiliation.

Previous experience with the DoD: Unified Response (Project C.U.R.E., n.d.b)

Budget (2011):

- Revenue:

Products & Services:	\$245,214.00
Contributions:	\$66,360,391.00
Investment Income:	<u>\$716,103.00</u>
Total Revenue:	\$65,889,502.00

- Expense:

Program Services:	\$70,725,140.00
Supporting Services:	<u>\$1,456,675.00</u>
Total Expense:	\$72,181,815.00

(Project C.U.R.E., 2012)

27. Project Handclasp Foundation

Mission/Primary Focus: The mission of Project Handclasp Foundation is

to receive, collect, consolidate and store humanitarian, educational, and goodwill material for transportation on naval vessels and distribution by U.S. Navy and Marine Corps personnel on behalf of American citizens to needy people overseas. As a secondary purpose, Project Handclasp may accept and arrange space available transportation of consigned material from organizations or individuals who desire transportation to specified recipient organizations overseas. (Project Handclasp Foundation, 2013)

Capabilities: The types of material considered appropriate for distribution through Project Handclasp include

- “Material to supplement basic necessities; e.g., food, clothing, treadle sewing machines and accessories, medical equipment and supplies, hygienic items, hand tools, and light building material” (Project Handclasp Foundation, 2013)
- “Educational material; e.g., textbooks, library books, magazines, school supplies, learning aids, and audiovisual item” (Project Handclasp Foundation, 2013)
- “Recreational material for children; e.g., toys, athletic equipment, and playground equipment” (Project Handclasp Foundation, 2013)
- “Overseas port visit mementos: e.g., souvenirs and mementos of shipboard visits” (Project Handclasp Foundation, 2013)

Religious Affiliation: No affiliation.

Previous experience with the DoD: Founded by the Department of the Navy in 1962 (Project Handclasp Foundation, 2013)

Budget (2012):

- Revenue:

Contributions and Grants:	\$19,901.00
Investment Income:	<u>\$9,161.00</u>
Total Revenue:	\$29,062.00

- Expense:

Administration:	\$1,516.00
Other Expenses:	<u>\$16,883.00</u>
Total Expense:	\$18,399.00

- Net Income:

Total Revenue:	\$29,062.00
Total Expense:	<u>\$18,399.00</u>
Net Income:	\$10,663.00

(Project Handclasp Foundation, 2013)

28. Project HOPE

Mission/Primary Focus: Project HOPE’s mission is “to achieve sustainable advances in health care around the world by implementing health education programs and providing humanitarian assistance in areas of need” (Project HOPE, n.d.a).

Capabilities: Project Hope is

committed to long-term sustainable health care with focuses on educating health professionals and community workers, strengthening health facilities, fighting diseases such as tuberculosis, HIV/AIDS and diabetes and providing humanitarian assistance through donated medicines, medical supplies and volunteer medical help. (Project HOPE n.d.b)

Religious Affiliation: No affiliation.

Previous experience with the DoD: Unified Response (Project Hope, n.d.c)

Budget:

- Revenue:

Products & Services:	\$40,872,000.00
Contributions:	\$173,576,000.00
Investment Income:	<u>\$5,850,000.00</u>
Total Revenue:	\$220,298,000.00

- Expense:

Program Services:	\$222,856,000.00
Supporting Services:	<u>\$12,153,000.00</u>
Total Expense:	\$235,009,000.00

(Project Hope, 2013)

29. Registered Nurse Response Network

Mission/Primary Focus: The organization aims to “promote a unified vision of collective action for nurses with campaigns to:

- Advance the interests of direct care nurses and patients across the U.S.
- Organize all direct care RNs into a single organization capable of exercising influence over the healthcare industry, governments, and employers.
- Promote effective collective bargaining representation to all NNU affiliates to promote the economic and professional interests of all direct care RNs.
- Expand the voice of direct care RNs and patients in public policy, including the enactment of safe nurse to patient ratios and patient advocacy rights in Congress and every state.
- Win healthcare justice, accessible, quality healthcare for all, as a human right.” (NNU, n.d.a)

Capabilities: Provides qualified nurses to provide qualified care and education to those affected by disaster (NNU, n.d.a)

Religious Affiliation: No affiliation.

Previous experience with the DoD: Unknown

Budget (2012): No record found

30. Rotary International

Mission/Primary Focus: The mission of Rotary International is “to provide service to others, promote integrity, and advance world understanding, goodwill, and peace through its fellowship of business, professional, and community leaders” (Rotary International, n.d.b) by:

- FIRST. The development of acquaintance as an opportunity for service;
- SECOND. High ethical standards in business and professions; the recognition of the worthiness of all useful occupations; and the dignifying of each Rotarian’s occupation as an opportunity to serve society;
- THIRD. The application of the ideal of service in each Rotarian’s personal, business, and community life;
- FOURTH. The advancement of international understanding, goodwill, and peace through a world fellowship of business and professional persons united in the ideal of service. (Rotary International, n.d.b)

Capabilities: “The most successful and sustainable Rotary capabilities tend to fall within one of the following six areas:

- Peace and conflict prevention/resolution
- Disease prevention and treatment
- Water and sanitation
- Maternal and child health
- Basic education and literacy
- Economic and community development” (Rotary International, n.d.a).

Religious Affiliation: No affiliation (Rotary International, n.d.d).

Previous experience with the DoD: Unified Response (Rotary International, n.d.c)

Budget (2012):

• Revenue:		
	Products & Services:	\$178,400,000.00
	Contributions:	\$2,700,000.00
	Investment Income:	<u>\$14,800,000.00</u>
	Total Revenue:	\$166,300,000.00

- Expense:

Program Services:	\$204,000,000.00
Supporting Services:	<u>\$23,400,000.00</u>
Total Expense:	\$227,400,000.00

(Rotary International, 2013)

31. Spirit of America

Mission/Primary Focus: Spirit of America’s goal “is to help Americans serving abroad assist people in need” (Spirit of America, n.d.).

Capabilities: Provides whatever U.S. troops need to help the local people (sewing machines, blankets, clean water, job training, etc.; Spirit of America, n.d.)

Religious Affiliation: No affiliation.

Previous experience with the DoD: Closely affiliated with U.S. military; does a great deal of work with CENTCOM; can help in various ways in the SOUTHCOM AOR (Spirit of America, n.d.)

Budget (2011):

- Revenue:

Products & Services:	\$0.00
Contributions:	\$1,565,030.00
Investment Income:	<u>\$4,934.00</u>
Total Revenue:	\$1,560,096.00
- Expense:

Program Services:	\$969,776.00
Supporting Services:	<u>\$554,275.00</u>
Total Expense:	\$1,524,051.00

(Spirit of America, 2012)

32. The Message Program

Mission/Primary Focus: The Message Program’s mission is to provide medical/dental and EMS/fire supplies along with education on the use of these items. (The Message Program, n.d.c).

Capabilities: The Message Program lists its capabilities as “securing donations of supplies and equipment from the United States for needs based distribution in other countries” (The Message Program, n.d.b), as well as “providing proper training in the use of distributed equipment and supplies” (The Message Program, n.d.b). The program also supplies medical, dental, EMS, and fire equipment collected in the United States for distribution to providers in other countries; facilitates the shipment and distribution of general aid such as school supplies, hygiene kits, clothing, shoes, and linens; and provides training on basic medical procedures (The Message Program, n.d.b).

Religious Affiliation: No affiliation.

Previous experience with the DoD: None

Budget (2011):

- Revenue:

Contributions and Grants:	<u>\$181,880.00</u>
Total Revenue:	\$181,880.00

- Expense:

Other Expenses:	<u>\$11,653.00</u>
Total Expense:	\$11,653.00

- Net Income:

Total Revenue:	\$181,880.00
Total Expense:	<u>\$11,653.00</u>
Net Income:	\$170,317.00

(The Message Program, 2012)

33. University of California San Diego Pre-Dental Society (UCSD PDS)

Mission/Primary Focus: USCD PDS’s mission is to “provide accessible, quality healthcare for the underserved in a respectful environment in which students, health professionals, patients, and community members learn from one another” (UCSD PDS, n.d.b).

Capabilities: This organization lists its capabilities as “partnership with the community, provide accessible, quality healthcare for the underserved in a respectful environment in which students, health professionals, patients, and community members learn from one another.” (UCSD PDS, n.d.b).

Religious Affiliation: No affiliation.

Previous experience with the DoD:

Since 2006, our organization has partnered with the U.S. Navy in their humanitarian missions abroad. Students and professionals have an opportunity to provide care on floating Navy hospital ships—USNS Mercy and USNS Comfort, as well as the USS Peleliu, USS Byrd, and USS Cleveland Greyhull ships. (UCSD Pre-Dental Society, n.d.c)

Budget: Does not file an IRS Form 990 under UCSD PDS. All financials are rolled up under UCSD with no financial break-outs.

34. Veterinarians Without Borders

Mission/Primary Focus: This organization aims to “enhance human and animal health and create a secure, diverse, and healthy food supply for all the world’s people” (Veterinarians Without Borders, n.d.).

Capabilities: This organization lists its capabilities as follows:

- “Trains local populace and animal health care workers to better recognize and prevent disease in animal populations.
- Controls diseases transmitted between animals and man, as well as limits diseases of livestock and wildlife” (Veterinarians Without Borders, n.d.).

Religious Affiliation: No affiliation.

Previous experience with the DoD: None

Budget (2012):

- Revenue:

Contributions and Grants:	\$19,447.00
Service Revenue:	<u>\$76,173.00</u>
Total Revenue:	\$95,620.00

- Expense:

Other Expenses:	<u>\$113,897.00</u>
Total Expense:	\$113,897.00
- Net Income:

Total Revenue:	\$95,620.00
Total Expense:	<u>\$113,897.00</u>
Net Income:	-\$18,277.00

(Veterinarians Without Borders, 2013)

35. Wheelchair Foundation

Mission/Primary Focus: The Wheelchair Foundation explains that it is

leading an international effort to create awareness of the needs and abilities of people with physical disabilities, to promote the joy of giving, create global friendship, and to deliver a wheelchair to every child, teen and adult in the world who needs one, but cannot afford one. For these people, the Wheelchair Foundation delivers Hope, Mobility and Independence. (Wheelchair Foundation, n.d.d)

Capabilities: Provides wheelchairs to the needy (Wheelchair Foundation, n.d.b)

Religious Affiliation: No affiliation.

Previous experience with the DoD: Unified Response (Wheelchair Foundation, n.d.c)

Budget (2007):

- Revenue:

Products & Services:	\$15,065,067.00
Contributions:	\$140,692.00
Investment Income:	<u>\$55,143.00</u>
Total Revenue:	\$15,260,902.00
- Expense:

Program Services:	\$8,876,543.00
Supporting Services:	<u>\$2,602,705.00</u>
Total Expense:	\$11,479,248.00

(Wheelchair Foundation, 2008)

36. World Vets

Mission/Primary Focus: The mission of World Vets is “to improve the health and well-being of animals by providing veterinary aid and training in developing countries and by providing disaster relief worldwide” (World Vets, n.d.d).

Capabilities: World Vets has five established programs to help animals:

- Veterinary Field Projects
- Small Animals—“Provides skilled teams of veterinarians and technicians that execute community wide spay neuter campaigns as well as health consultations for dogs and cats. Our goal is to control the local animal population as well as treat and prevent zoonotic diseases. World Vets teams also perform other surgeries or treat injuries on a case by case basis. We operate a fully functional mobile surgery setup and travel with the veterinary supplies needed to provide routine veterinary care” (World Vets, n.d.d).
- Equine—“World Vets provides skilled teams of veterinarians and technicians to provide routine veterinary care for horses (and donkeys) as well as the veterinary supplies needed to perform parasite control, vaccinations and treat any health concerns or existing injuries” (World Vets, n.d.f).
- Livestock and Animal Husbandry—“Cooperatives in developing countries to build capacity for improved production, while also placing an emphasis on animal welfare and sustainability. Veterinarians can play a key role in addressing world hunger and poverty through improving livestock management and production in the developing world, especially among small farmers” (World Vets, n.d.f).
- Disaster Response
- “World Vets is currently creating a database of potential disaster relief volunteers that can be deployed in the event of an international disaster. World Vets has trained disaster personnel on call at all times and in many cases we also have the need to recruit volunteers to aid on rescue missions” (World Vets, n.d.b).
- Training Program
“World Vets conducts its International Veterinary Medicine Program in their state of the art Latin America Veterinary Training Center” (World Vets, n.d.e).
- Civil-Military Humanitarian Aid

World Vets veterinary teams live on-board a navy ship and provide veterinary services onshore. Our teams work alongside and in collaboration with US Army vets and technicians as well as animal health care professionals and local veterinarians in host nations. (World Vets, n.d.a).

- Veterinarian Supply Donation Program
- “World Vets works to collect, transport, and distribute veterinarian supplies and services to countries in need” (World Vets, n.d.e).

Religious Affiliation: No affiliation

Previous experience with the DoD: Represented on two U.S. Navy–led humanitarian aid missions: Pacific Partnership and Continuing Promise. These missions provide medical, dental, and veterinary coverage to developing regions in the South Pacific and Central/South America, respectively. World Vets contributes veterinary manpower and skills to accomplish the mission’s objectives by organizing volunteer opportunities for veterinary professionals (World Vets, n.d.a).

Budget (2012):

- Revenue:

Contributions and Grants:	\$1,698,393.00
Program Revenue:	\$334,590.00
Investment Income:	\$1,203.00
Other Revenue:	<u>\$1,171.00</u>
Total Revenue:	\$2,035,357.00
- Expense:

Grants Paid:	\$218,628.00
Salaries:	\$198,328.00
Program Services:	<u>\$1,003,586.00</u>
Total Expense:	\$1,420,542.00
- Net Income:

Total Revenue:	\$2,035,357.00
Total Expense:	<u>\$1,420,542.00</u>
Net Income:	\$614,815.00

(World Vets, n.d.c)

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IV. ANALYSIS

A. THE SPHERE PROJECT

This section presents an analysis and evaluation of the capabilities of the 36 NGOs provided by SOUTHCOM. In developing this analysis, our focus is on creating a standardized process based upon already established metrics criteria in evaluating NGOs and their respective capabilities. This tool can be applied by any COCOM in evaluating the capabilities of its partner NGOs in their respective AORs. Specifically, this evaluation focuses only on disaster response capabilities, as opposed to an analysis on humanitarian assistance capabilities overall. This is not to say that such an analysis cannot be undertaken, for the criteria used can be applied in evaluating an NGO across the broader spectrum of HA/DR, ranging from initial response to a disaster or humanitarian crisis through sustainment, and finally self-sufficiency of the affected population.

One of the fundamental components or aspects of the evaluation was to be able to derive some measurable and quantifiable metrics in determining the capabilities that each NGO possessed and with whom SOUTHCOM could partner to enhance its disaster response capabilities. We draw upon the *Department of Defense Support to Foreign Disaster Relief (Handbook for JTF Commanders and Below)* as a guide. The handbook states:

Metrics matter. Metrics are the means by which operational progress is measured. Metrics capture and demonstrate level of effort/need and measures of performance/effectiveness. Relevant metrics facilitate accurate and timely reporting to higher echelon commands and national authorities. It is important that the metrics utilized by the JTF be consistent with those used by the US Embassy and USAID/OFDA. Data collection requirements and the associated standardized metrics should be disseminated to deploying forces as early as possible.

The JTF Commander and Staff should not develop their own metrics, but instead use internationally accepted metrics. The

SPHERE Project developed a handbook entitled the *“Humanitarian Charter and Minimum Standards in Disaster Response.”* (DoD, 2011, section 5.2.7)

B. SPHERE PROJECT PERFORMANCE MEASURES

The criteria used in this project rely heavily upon the aforementioned Sphere Project and its established criteria for the evaluation of NGOs. The Sphere Project identifies itself as follows:

The Sphere Projector ‘Sphere’ was initiated in 1997 by a group of humanitarian non-governmental organizations (NGOs) and the International Red Cross and Red Crescent Movement. Their aim was to improve the quality of their actions during disaster response and to be held accountable for them. (The Sphere Project, 2011, p. 4)

The Sphere Project further states on its website:

The Sphere Project is a voluntary initiative that brings a wide range of humanitarian agencies together around a common aim - to improve the quality of humanitarian assistance and the accountability of humanitarian actors to their constituents, donors and affected populations. The Sphere Handbook, Humanitarian Charter and Minimum Standards in Humanitarian Response, is one of the most widely known and internationally recognized sets of common principles and universal minimum standards in lifesaving areas of humanitarian response. (The Sphere Project, n.d.)

The Sphere Project established a set of minimum standards for humanitarian aid. “The minimum standards cover four primary lifesaving areas of humanitarian aid: (1) water supply, sanitation and hygiene promotion; (2) food security and nutrition; (3) shelter, settlement and non-food items; (4) and health action” (The Sphere Project, 2011).

These four areas that are crucial in effectively serving populations facing drastic circumstance are further expanded into a list of minimum standards. What follows are those standards, which were subsequently applied in evaluating the 36 NGOs presented by SOUTHCOM. According to the Sphere Project (2011), the minimum standards for humanitarian aid are:

1. Water supply, sanitation, and hygiene promotion (WASH)

Water supply, sanitation and hygiene promotion (WASH)

Standard 1: WASH program design and implementation. WASH needs of the affected population are met and users are involved in the design, management and maintenance of the facilities where appropriate. (The Sphere Project, 2011, p. 89)

Hygiene promotion

Standard 1: Hygiene promotion implementation. Affected men, women and children of all ages are aware of key public health risks and are mobilized to adopt measures to prevent the deterioration in hygienic conditions and to use and maintain the facilities provided. (The Sphere Project, 2011, p. 91)

Standard 2: Identification and use of hygiene items. The disaster-affected population has access to and is involved in identifying and promoting the use of hygiene items to ensure personal hygiene, health, dignity and well-being. (The Sphere Project, 2011, p. 94)

Water supply

Standard 1: Access and water quantity. All people have safe and equitable access to a sufficient quantity of water for drinking, cooking and personal and domestic hygiene. Public water points are sufficiently close to households to enable use of the minimum water requirement. (The Sphere Project, 2011, p. 97)

Standard 2: Water quality. Water is palatable and of sufficient quality to be drunk and used for cooking and personal and domestic hygiene without causing risk to health. (The Sphere Project, 2011, p. 100)

Standard 3: Water facilities. People have adequate facilities to collect, store and use sufficient quantities of water for drinking, cooking and personal hygiene, and to ensure that drinking water remains safe until it is consumed. (The Sphere Project, 2011, p. 103)

Excreta disposal

Standard 1: Environment free from human feces. The living environment in general and specifically the habitat, food production areas, public centers and surroundings of drinking water sources are free from human fecal contamination. (The Sphere Project, 2011, p. 105)

Standard 2: Appropriate and adequate toilet facilities. People have adequate, appropriate and acceptable toilet facilities, sufficiently close to their dwellings, to allow rapid, safe and secure access, day and night. (The Sphere Project, 2011, p. 107)

Vector control

Standard 1: Individual and family protection. All disaster-affected people have the knowledge and the means to protect themselves from disease and nuisance vectors that are likely to cause a significant risk to health or well-being. (The Sphere Project, 2011, p. 111)

Standard 2: Physical, environmental and chemical protection measures. The environment where the disaster-affected people are placed does not expose them to disease-causing and nuisance vectors, and those vectors are kept to a reduced level where possible. (The Sphere Project, 2011, p. 114)

Standard 3: Chemical control safety. Chemical vector control measures are carried out in a manner that ensures that staff, the disaster affected population and the local environment are adequately protected, and avoids creating chemical resistance to the substances used. (The Sphere Project, 2011, p. 116)

Solid waste management

Standard 1: Collection and disposal. The affected population has an environment not littered by solid waste, including medical waste, and has the means to dispose of their domestic waste conveniently and effectively. (The Sphere Project, 2011, p. 117)

Drainage

Surface water in or near settlements may come from household and water point wastewater, leaking toilets and sewers, rainwater or rising floodwater. The main health risks associated with surface water are contamination of water supplies and the living environment, damage to toilets and dwellings, vector breeding, and drowning.

Standard 1: Drainage work. People have an environment in which health risks and other risks posed by water erosion and standing water, including storm-water, floodwater, domestic wastewater and wastewater from medical facilities, are minimized. (The Sphere Project, 2011, p. 121)

2. Minimum standards in food security and nutrition

Food security and nutrition assessment

Standard 1: Food security. Where people are at increased risk of food insecurity, assessments are conducted using accepted methods to understand the type, degree and extent of food insecurity, to identify those most affected and to define the most appropriate response. (The Sphere Project, 2011, p. 150)

Standard 2: Nutrition. Where people are at increased risk of malnutrition, assessments are conducted using internationally accepted methods to understand the type, degree and extent of malnutrition and identify those most affected, those most at risk and the appropriate response. (The Sphere Project, 2011, p. 154)

Infant and young child feeding

Standard 1: Policy guidance and coordination. Safe and appropriate infant and young child feeding for the population is protected through implementation of key policy guidance and strong coordination. (The Sphere Project, 2011, p. 159)

Standard 2: Basic and skilled support. Mothers and caregivers of infants and young children have access to timely and appropriate feeding support that minimizes risks and optimizes nutrition, health and survival outcomes. (The Sphere Project, 2011, p. 160)

Management of acute malnutrition and micronutrient deficiencies

Standard 1: Moderate acute malnutrition. Moderate acute malnutrition is addressed. (The Sphere Project, 2011, p. 165)

Standard 2: Severe acute malnutrition. Severe acute malnutrition is addressed. (The Sphere Project, 2011, p. 169)

Standard 3: Micronutrient deficiencies. Micronutrient interventions accompany public health and other nutrition interventions to reduce common diseases associated with emergencies and address micronutrient deficiencies. (The Sphere Project, 2011, p. 173)

Food security: general

Standard 1: General nutrition requirements. Ensure the nutritional needs of the disaster-affected population, including those most at risk, are met. (The Sphere Project, 2011, p. 180)

Standard 2: Appropriateness and acceptability. The food items provided are appropriate and acceptable to recipients so that they can be used efficiently and effectively at the household level. (The Sphere Project, 2011, p. 184)

Standard 3: Food quality and safety. Food distributed is fit for human consumption and of appropriate quality. (The Sphere Project, 2011, p. 186)

Standard 4: Supply chain management (SCM). Commodities and associated costs are well-managed using impartial, transparent and responsive systems. (The Sphere Project, 2011, p. 188)

Standard 5: Targeting and distribution. The method of targeted food distribution is responsive, timely, transparent and safe, supports dignity and is appropriate to local conditions. (The Sphere Project, 2011, p. 192)

Standard 6: Food use. Food is stored, prepared and consumed in a safe and appropriate manner at both household and community levels. (The Sphere Project, 2011, p. 194)

Food security: cash and voucher transfers

Standard 1: Access to available goods and services. Cash and vouchers are considered as ways to address basic needs and to protect and re-establish livelihoods. (The Sphere Project, 2011, p. 200)

Food security: livelihoods

Standard 1: Primary production. Primary production mechanisms are protected and supported. (The Sphere Project, 2011, p. 204)

Standard 2: Income and employment. Where income generation and employment are feasible livelihood strategies, women and men have equal access to appropriate income-earning opportunities. (The Sphere Project, 2011, p. 208)

Standard 3: Access to markets. The disaster-affected population's safe access to market goods and services as producers, consumers and traders is protected and promoted. (The Sphere Project, 2011, p. 211)

3. Minimum standards in shelter, settlements, and non-food items

Shelter and settlement

Standard 1: Strategic planning. Shelter and settlement strategies contribute to the security, safety, health and well-being of both displaced and non-displaced affected populations and promote recovery and reconstruction where possible. (The Sphere Project, 2011, p. 249)

Standard 2: Strategic planning. Shelter and settlement strategies contribute to the security, safety, health and well-being of both displaced and non-displaced affected populations and promote recovery and reconstruction where possible. (The Sphere Project, 2011, p. 254)

Standard 3: Covered living space. People have sufficient covered living space providing thermal comfort, fresh air and protection from the climate ensuring their privacy, safety and health and enabling essential household and livelihood activities to be undertaken. (The Sphere Project, 2011, p. 258)

Standard 4: Construction. Local safe building practices, materials, expertise and capacities are used where appropriate, maximizing the involvement of the affected population and local livelihood opportunities. (The Sphere Project, 2011, p. 262)

Standard 5: Environmental impact. Shelter and settlement solutions and the material sourcing and construction techniques used minimize adverse impact on the local natural environment. (The Sphere Project, 2011, p. 265)

Non-food items: clothing, bedding and household items

Standard 1: Individual, general household and shelter support items. The affected population has sufficient individual, general household and shelter support items to ensure their health, dignity, safety and well-being. (The Sphere Project, 2011, p. 269)

Standard 2: Clothing and bedding. The disaster-affected population has sufficient clothing, blankets and bedding to ensure their personal comfort, dignity, health and well-being. (The Sphere Project, 2011, p. 271)

Standard 3: Cooking and eating utensils. The disaster-affected population has access to culturally appropriate items for preparing and

storing food, and for cooking, eating and drinking. (The Sphere Project, 2011, p. 273)

Standard 4: Stoves, fuel and lighting. The disaster-affected population has access to a safe, fuel-efficient stove and an accessible supply of fuel or domestic energy, or to communal cooking facilities. Each household also has access to appropriate means of providing sustainable artificial lighting to ensure personal safety. (The Sphere Project, 2011, p. 275)

Standard 5: Tools and fixings. The affected population, when responsible for the construction or maintenance of their shelter or for debris removal, has access to the necessary tools, fixings and complementary training. (The Sphere Project, 2011, p. 276)

4. Minimum standards in health action

Health systems

Standard 1: Health service delivery. People have equal access to effective, safe and quality health services that are standardized and follow accepted protocols and guidelines. (The Sphere Project, 2011, p. 296)

Standard 2: Human resources. Health services are provided by trained and competent health workforces who have an adequate mix of knowledge and skills to meet the health needs of the population. (The Sphere Project, 2011, p. 301)

Standard 3: Drugs and medical supplies. People have access to a consistent supply of essential medicines and consumables. (The Sphere Project, 2011, p. 302)

Standard 4: Health financing. People have access to free primary healthcare services for the duration of the disaster. (The Sphere Project, 2011, p. 304)

Standard 5: Health information management. The design and delivery of health services are guided by the collection, analysis, interpretation and utilization of relevant public health data. (The Sphere Project, 2011, p. 305)

Standard 6: Leadership and coordination. People have access to health services that are coordinated across agencies and sectors to achieve maximum impact. (The Sphere Project, 2011, p. 307)

Essential health services

Standard 1: Prioritizing health services. People have access to health services that are prioritized to address the main causes of excess mortality and morbidity. (The Sphere Project, 2011, p. 309)

Control of communicable diseases

Standard 1: Communicable disease prevention. People have access to information and services that are designed to prevent the communicable diseases that contribute most significantly to excess morbidity and mortality. (The Sphere Project, 2011, p. 312)

Standard 2: Communicable disease diagnosis and case management. People have access to effective diagnosis and treatment for those infectious diseases that contribute most significantly to preventable excess morbidity and mortality. (The Sphere Project, 2011, p. 314)

Standard 3: Outbreak detection and response. Outbreaks are prepared for, detected, investigated and controlled in a timely and effective manner. (The Sphere Project, 2011, p. 316)

Child health

Standard 1: Prevention of vaccine-preventable diseases. Children aged 6 months to 15 years have immunity against measles and access to routine Expanded Program on Immunization (EPI) services once the situation stabilized. (The Sphere Project, 2011, p. 321)

Standard 2: Management of newborn and childhood illness. Children have access to priority health services that are designed to address the major causes of newborn and childhood morbidity and mortality. (The Sphere Project, 2011, p. 323)

Sexual and reproductive health

Standard 1: People have access to the priority reproductive health services of the Minimum Initial Service Package (MISP) at the onset of an emergency and comprehensive RH as the situation stabilizes. (The Sphere Project, 2011, p. 324)

Standard 2: People have access to the minimum set of HIV prevention, treatment, and care and support services during disasters. (The Sphere Project, 2011, p. 327)

Injury

Standard 1: People have access to effective injury care during disasters to prevent avoidable morbidity, mortality and disability. (The Sphere Project, 2011, p. 331)

Mental health

Standard 1: People have access to health services that prevent or reduce mental health problems and associated impaired functioning. (The Sphere Project, 2011, p. 333)

Non-communicable diseases

Standard 1: People have access to essential therapies to reduce morbidity and mortality due to acute complications or exacerbation of their chronic health condition. (The Sphere Project, 2011, p. 336)

C. NGO SCORING TABLE

In order to grade each organization we split the list between the three authors. Each author individually graded 12 NGO's based on the Sphere Project criteria. As a group we aggregated the grading and addressed any discrepancies or inconsistencies to come up with a final score.

Table 1: NGO Aggregate Scorecard shows each of SOUTHCOM's 36 NGOs along with their composite score under each of the Sphere Project's four core competencies outlined in the previous section. A score of 1 indicates that the NGO meets at least 50 percent of the specific standards outlined by the Sphere Project under the respective core competency listed. A score of 0 indicates that the NGO does not meet at least 50 percent of the specific standards outlined by the Sphere Project under the respective core competency listed.

Table 1. NGO Aggregate Scorecard

NGOs	Score			
	WASH	Food, Security, and Nutrition	Shelter, Settlement, and Non-food Items	Health Action
AeroBridge	0	0	1	1
American Red Cross	1	1	1	1
America's Relief Team	1	1	1	1
Baptist Health South Florida	0	1	0	1
Children's International	1	1	1	1
Chow	1	1	1	0
EDGE Outreach (WaterStep)	1	1	1	1
FAVACA	0	0	0	1
Food For the Poor	0	1	1	1
Foundation for the Advancement of Children's Esthetics	0	0	0	1
Give a Kid a Backpack	0	0	0	0
Heart to Heart International	0	0	1	1
Hope Haven	0	1	0	1
Hospital Sisters Mission Outreach	0	1	0	1
Interaction	1	1	1	1
International Relief and Development	1	1	1	1
John Hopkins Office of Critical Preparedness and Response	0	1	0	1
Latter Day Saint Charities	1	1	1	1
Lions Club International	1	1	1	1
Loving Hugs	0	0	0	0

NGOs	Score			
	WASH	Food, Security, and Nutrition	Shelter, Settlement, and Non-food Items	Health Action
Miami Children's Hospital	0	1	0	1
Midwest Mission Distribution Center	0	0	1	0
Operation Smile	0	0	0	1
Partners In Health	0	1	0	1
People to People International	0	0	0	0
Project CURE	0	1	0	1
Project Handclasp Foundation	0	0	1	0
Project HOPE	0	0	0	1
Registered Nurse Response Network	0	1	0	1
Rotary International	1	1	1	1
Spirit of America	0	0	1	0
The Message Program	0	0	0	0
University of California San Diego Pre-Dental Society	0	0	0	1
Vets Without Borders	0	1	0	1
Wheelchair Foundation	0	0	0	0
World Vets	0	0	0	1

Please refer to Appendix A to view a comprehensive list outlining whether or not the NGO possesses the specific capability with respect to the standards for such capability as laid out by the Sphere Project. In other words, the following list gives the commander a 50,000-foot view of each NGO with respect to the four core competencies mentioned previously. If more specific capability information is required for an NGO, then the commander can refer to Appendix A.

D. SCORECARD ANALYSIS

After applying the Sphere Project’s four criteria for evaluating the capacities of NGOs to the 36 provided by SOUTHCOM, we totaled the results to create a scorecard of the NGOs’ abilities to provide humanitarian assistance. “Fully capable” means that an NGO possesses at least 50 percent of the standards under each respective criterion outlined in Chapter IV. “Partially capable” means that the NGO possesses less than 50 percent of the standards under each respective criterion outlined in Chapter IV. “Not capable” means that the NGO possesses none of the standards under each respective criterion outlined in Chapter IV. Our results are as follows: suggest formatting the list below.

Minimum standards

- I. WASH
 - Fully capable: 7
 - Partially capable: 12
 - Not capable: 17
- II Food security and nutrition
 - Fully capable: 8
 - Partially capable: 15
 - Not capable: 13
- III Shelter, settlement, and non-food items
 - Fully capable: 7
 - Partially capable: 10
 - Not capable: 19

- IV Health action
- Fully capable: 20
 - Partially capable: 3
 - Not capable: 13

V. CONCLUSIONS AND RECOMMENDATIONS

A. CONCLUSIONS

President Obama's *National Strategy for Global Supply Chain Security* states:

The threat of natural disaster remains, and the global supply chain and its components continue to be attractive targets for terrorist attacks and criminal exploitation. And while the security of our citizens and our nation is the paramount concern, we must work to promote America's future economic growth and international competitiveness by remaining open for businesses to the world. (White House, 2012)

Having capable and secure NGO networks and partnerships in disaster relief will enhance positive American values on foreign countries and governments. In turn, this will support the president's vision of strong and secure supply chains to support natural disaster assistance in our country as well as in foreign countries.

One way to help clarify capabilities and assets is through identifying the strengths and weaknesses of the enabling partners, which is the focus of this project. This project examined 36 NGOs provided by SOUTHCOM and applied an established set of minimum standards provided by the Sphere Project which are contained in the following four capability clusters: (1) water supply, sanitation, and hygiene promotion; (2) shelter, settlement, and non-food items; (3) food security and nutrition; and (4) health action (The Sphere Project, 2011). Through this system of grading of the enabling partners and their respective capabilities, the combatant commander is provided with a tool that will help in the early coordination and collaboration of a disaster response that is part of a comprehensive U.S. government action.

B. RECOMMENDATIONS FOR FUTURE WORK

With the DoD mandated to assist in a unified response to foreign disasters, which is now considered a directed mission per DoD 5100.46 (DoD, 2012) in support of USAID and the Office of Foreign Disaster Assistance, it becomes essential that the geographic combatant commanders understand how they fit into "a carefully coordinated deployment

of military and civilian, public and private U.S. and international assets” (Combined Joint Operations from the Sea Centre of Excellence [CJOS COE], 2011). As part of this coordinated effort, it is paramount that the combatant commanders have a clearer understanding of the capabilities and assets of the enabling partners participating in the humanitarian response.

In its report, the DoD Office of Inspector General (2012) stated that there is a need for SOUTHCOM to implement best practices in some foreign disaster relief key areas such as increasing phase-zero activities and information sharing with non-DoD partners. This research is a start for SOUTHCOM to put better practices in place in the absence of updated guidance that can lead to inconsistencies in the interpretations of authorities and responsibilities to provide disaster relief assistance.

To truly understand the HA/DR capabilities of the major NGO players in each theater, additional research is required to identify all the NGOs’ capabilities based on their current projects in the regions (Daniels, 2012). This scorecard methodology based on the Sphere standards is a consensus start for SOUTHCOM to better practice information sharing with non-DoD organizations in the same context. In addition, decision-makers can collaborate and develop a plan to address one another’s strengths and weaknesses in order to be more effective before the next disaster strikes (Daniels, 2012).

Increasing the phase-zero planning efforts of SOUTHCOM to build a capability network of NGOs and intergovernmental organizations (IGOs) is a continuous process, and having a standard to measure self-proclaimed capabilities will enhance the readiness and coordination of the DoD and the NGO. Finding where the NGO fits in to the response required can be critical for the commander to access what is needed or not needed by the military. Continuously building an NGO capability network and having the NGO active in an area prior to an emergency are valuable for early-warning activities. NGOs operate at the ground level of a region or country, and often are the first organizations to witness or experience an activity or event that may lead to more serious conditions in the future (Hofstetter, 2010).

To enhance the phase-zero HA/DR capacity building, SOUTHCOM conducts disaster response training and exercises that are joint, intergovernmental, and multinational for disaster response. By inviting the NGOs to have a role or input for an exercise would only increase their All Partners Area Network (APAN) and disaster awareness programs throughout the region.

To enable better unity of effort with military aid and NGO aid for disaster response, the Center for Disaster Management and Humanitarian Assistance (CDMHA) has a representative placed in the Humanitarian Assistance Coordination Center (HACC). This will be another tool for the combatant commander in coordinating and collaborating with NGOs and IGOs to maintain or enhance the capability network to provide disaster relief effectively and efficiently with no redundancy of efforts.

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SOUTHCORNGOs 13-24													
Performance Measures	Hope Haven	Hospital Sisters Mission Outreach	Interaction	International Relief and Development	John Hopkins Office of Critical Preparedness and Response	Latter Day Saint Charities	Lions Club International	Loving Hugs	Miami Children's Hospital	Midwest Mission Distribution Center	Operation Smile	Partners In Health	
Water supply, sanitation and hygiene promotion (WASH)													
Hygiene promotion	1	1	1	1	1	1	1	0	1	0	1	1	
Water supply	0	0	1	1	0	1	1	0	0	0	0	0	
Excreta disposal	0	0	1	1	0	1	1	0	0	0	0	0	
Vector control	0	0	1	1	0	1	1	0	0	0	0	0	
Solid waste management	0	0	1	1	0	1	1	0	0	0	0	0	
Drainage	0	0	1	1	0	1	1	0	0	0	0	0	
Total	0	0	1	1	0	1	1	0	0	0	0	0	
Food Security and Nutrition													
Nutrition assessment	1	1	1	1	1	1	1	0	1	0	0	1	
Infant and young child feeding	1	0	1	1	1	1	1	0	1	0	0	1	
Management of acute malnutrition and micronutrient deficiencies	1	1	1	1	1	1	1	0	1	0	0	1	
Food security	0	1	1	1	1	1	1	0	1	0	0	0	
Food Transfer	0	0	1	1	0	1	1	0	0	0	0	0	
Cash voucher	0	0	1	1	0	1	1	0	0	0	0	0	
Livelihoods	0	1	1	1	1	1	1	0	1	0	0	0	
Total	1	1	1	1	1	1	1	0	1	0	0	1	
Shelter, settlement and non-food items													
Shelter and settlement	0	0	1	1	0	1	1	0	0	0	0	0	
Non-Food Items	0	0	1	1	0	1	1	0	0	1	0	0	
Clothing	0	0	1	1	0	1	1	0	0	0	0	0	
Bedding	0	0	1	1	0	1	1	0	0	0	0	0	
Household Items	0	0	1	1	0	1	1	0	0	1	0	0	
Total	0	0	1	1	0	1	1	0	0	1	0	0	
Health action													
Health Systems	1	1	1	1	1	1	1	0	1	0	1	1	
Essential Health Services	1	1	1	1	1	1	1	0	1	0	1	1	
Total	1	1	1	1	1	1	1	0	1	0	1	1	

SOUTHCOM NGOs 25-36													
Performance Measures		People to People International	Project CURE	Project Handclasp Foundation	Project HOPE	Registered Nurse Response Network	Rotary International	Spirit of America	The Message Program	University of California San Diego Pre-Dental Society	Vets Without Borders	Wheelchair Foundation	World Vets
Water supply, sanitation and hygiene promotion (WASH)	Hygiene promotion	0	1	0	1	1	1	0	0	1	1	0	1
	Water supply	0	0	0	0	0	1	0	0	0	0	0	0
	Excreta disposal	0	0	0	0	0	1	0	0	0	0	0	0
	Vector control	0	0	0	0	0	1	0	0	0	1	0	1
	Solid waste management	0	0	0	0	0	1	0	0	0	0	0	0
	Drainage	0	0	0	0	0	1	0	0	0	0	0	0
	Total		0	0	0	0	0	1	0	0	0	0	0
Food Security and Nutrition	Nutrition assessment	0	1	0	1	1	1	0	0	0	0	0	0
	Infant and young child feeding	0	0	0	0	1	1	0	0	0	0	0	0
	Management of acute malnutrition and micronutrient deficiencies	0	1	0	1	1	1	0		0	0	0	0
	Food security	0	1	0	0	0	1	0	0	0	1	0	1
		Food Transfer	0	1	0	0	0	1	0	0	0	0	0
		Cash voucher	0	0	0	0	0	1	0	0	0	0	0
		Livelihoods	0	1	0	0	0	1	0	0	0	1	0
Total		0	1	0	0	1	1	0	0	0	0	0	0
Shelter, settlement and non-food items	Shelter and settlement	0	0	0	0	0	1	0	0	0	0	0	0
	Non-Food Items	0	0	1	0	0	1	1	0	0	0	0	0
		Clothing	0	0	0	0	0	1	1	0	0	0	0
		Bedding	0	0	0	0	0	1	1	0	0	0	0
		Household Items	0	0	1	0	0	1	1	0	0	0	0
	Total		0	0	1	0	0	1	1	0	0	0	0
Health action	Health Systems	0	1	0	1	1	1	0	0	0	1	0	1
	Essential Health Services	0	1	0	1	1	1	0	0	1	0	0	0
	Total	0	1	0	1	1	1	0	0	1	1	0	1

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APPENDIX B. COMMANDER’S CUT CARD

Green (full capability), yellow (partially capable), and red (non-capable) under the respective core competency

NGO	Water supply, sanitation, and hygiene promotion	Food security and nutrition	Shelter, settlement, and non-food items	Health action
AeroBridge	Red	Yellow	Yellow	Yellow
American Red Cross	Green	Green	Green	Green
America's Relief Team	Green	Green	Green	Green
Baptist Health South Florida	Yellow	Yellow	Red	Green
Children's International	Green	Green	Yellow	Green
Chow	Yellow	Green	Green	Yellow
EDGE Outreach (WaterStep)	Green	Yellow	Yellow	Yellow
FAVACA	Yellow	Red	Red	Green
Food For the Poor	Red	Green	Green	Yellow
Foundation for the Advancement of Children's Esthetics	Yellow	Yellow	Red	Green
Give a Kid a Backpack	Red	Red	Yellow	Red
Heart to Heart International	Yellow	Red	Yellow	Green
Hope Haven	Yellow	Yellow	Red	Green
Hospital Sisters Mission Outreach	Yellow	Yellow	Red	Green
Interaction	Green	Green	Green	Green
International Relief and Development	Green	Green	Green	Green
John Hopkins Office of Critical Preparedness and Response	Yellow	Yellow	Red	Green
Latter Day Saint Charities	Green	Green	Green	Green
Lions Club International	Green	Green	Green	Green
Loving Hugs	Red	Red	Red	Red
Miami Children's Hospital	Yellow	Yellow	Red	Green
Midwest Mission Distribution Center	Red	Red	Yellow	Red
Operation Smile	Yellow	Red	Red	Green
Partners In Health	Yellow	Yellow	Red	Green
People to People International	Red	Red	Red	Red
Project CURE	Yellow	Yellow	Red	Green
Project Handclasp Foundation	Red	Red	Yellow	Red
Project HOPE	Yellow	Yellow	Red	Green
Registered Nurse Response Network	Yellow	Yellow	Red	Green
Rotary International	Green	Green	Green	Green
Spirit of America	Red	Red	Yellow	Red
The Message Program	Red	Red	Red	Red
University of California San Diego Pre-Dental Society	Yellow	Red	Red	Yellow
Vets Without Borders	Yellow	Yellow	Red	Yellow
Wheelchair Foundation	Red	Red	Red	Red
World Vets	Yellow	Yellow	Red	Yellow

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